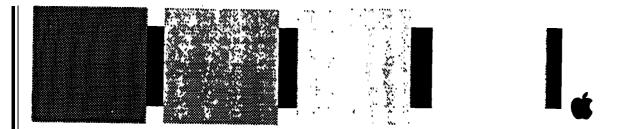


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HEALTHY SCHOOLS

A Directory of Federal Programs and Activities Related to Health Promotion Through the Schools

U.S. Department of Health and Human Services Expression (1988)



HEALTHY SCHOOLS

A Directory of Federal Programs and Activities Related to Health Promotion Through the Schools

Compiled by the Federal Interagency Ad Hoc Committee on Health Promotion Through the Schools

U.S. Department of Health and Human Services



Foreword

Good health is essential to children's growth and development, to their ability to take advantage of educational opportunities, and to their future prospects. The profile of health risks facing today's children and adolescents is changing. Once dominated by the threat of major infectious diseases, many of the current risks are generated by social, behavioral, and environmental factors. Many causes of morbidity and mortality are preventable and result from behaviors that usually are established during childhood and adolescence. Additionally, many of the most important risk factors for chronic disease in later years have their roots in youthful behaviors.

Children and adolescents must be healthy in order to learn, and they must learn in order to be healthy. The knowledge, attitudes, and skills developed as a result of effective school health programs enable individuals to make informed choices about behavior that will affect their own health throughout their lives, as well as the health of the families for which they will be responsible and the health of the communities in which they live.

The first of the National Education Goals, set out in *GOALS* 2000, calls for every child in America to "start school ready to learn." Successful school health programs can help children in elementary and secondary school maintain this healthy start. Successful school health programs likewise represent a key to attaining the *Healthy People 2000* National Health Promotion and Disease Prevention Objectives. Numerous Federal programs now address elements of school health. With this publication, it is the intention of the Department of Education and the Department of Health and Human Services to provide a guide to Federal resources available to help communities plan and implement school health programs that fit their particular needs. Working together, health professionals, educators, parents, and others in the community can make "Healthy Schools" a reality.

Federal Interagency Ad Hoc Committee on Health Promotion Through the Schools

In 1983, the U.S. Department of Health and Human Services and the U.S. Department of Education co-sponsored an "Interagency Meeting on Health Promotion Through the Schools." A survey carried out in preparation for this meeting ascertained that **the** activities of numerous Federal departments, agencies, and offices were relevant to school health. Participants in this interagency meeting expressed the need for an ongoing forum to discuss Federal school health promotion initiatives.

Since 1983, the U.S. Public Health Service's Office of Disease Prevention and Health Promotion in the Department of Health and Human Services has coordinated and chaired the Federal Interagency Ad Hoc Committee on Health Promotion Through the Schools. The committee meets bimonthly and serves as an ongoing forum for sharing information among Federal agencies about programs and activities related to school health and for promoting interagency coordination and collaboration. In July 1990, the U.S. Department of Education's Comprehensive School Health Education Program began cochairing the committee along with the Office of Disease Prevention and Health Promotion. Agencies and offices of the Federal departments listed below participate on the Ad Hoc Committee on Health Promotion Through the Schools.

U.S. Department of Agriculture
U.S. Department of Defense
U.S. Department of Education
U.S. Department of Health and Human Services
U.S. Department of the Interior
U.S. Department of Justice
U.S. Department of Transportation
U. S. Environmental Protection Agency

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Introduction

Two recent initiatives, Healthy People 2000: National Health Promotion and Disease Prevention Objectives and the National Education Goals, focus attention on the important interrelationships between health and education for children and youth of school age. Fully 15 of the Healthy People 2000 objectives are directly achievable by schools, and schools will play important roles in achieving nearly 100 additional Healthy People 2000 objectives. The National Education Goals address the health aspects of school readiness and the provision of safe, alcohol-and drug-free school environments offering comprehensive K-12 alcohol and drug prevention education. Both the Healthy People 2000 objectives and the National Education Goals include objectives and goals to increase the high school graduation rate and point out the inextricable relationship between health and educational success.

In the Spring of 1991, *the* Federal Interagency Ad Hoc Committee on Health Promotion Through the Schools, working with the Public Health Service's Office of Disease Prevention and Health Promotion, asked staff from seven Federal departments, as well as independent Federal agencies and commissions, to provide information about any of their programs or other activities which they felt were relevant to health promotion through the schools. For purposes of this undertaking, school health promotion included school health education and its various categorical components; nutrition and healthy school food services; school health services, including immunizations, school nursing, screening, counseling and mental health, and school-based health services; physical education, sports, 'and recreation; 'the school as a healthy environment; worksite health promotion for faculty and staff; and school and community health promotion efforts. In addition, those providing information were asked to delineate the target groups for 'their school, health-related programs or activities, including students (preschool, elementary, middle school or junior high, high school, or students with special needs); out-of-school, high-risk youth; parents; faculty and staff; or 'the community. They were also asked for brief descriptions of their programs or activities, a listing of any materials or publications produced by their programs which were considered relevant to school health, and the names of individuals to contact for further information about the programs or activities. In addition, Federally supported clearinghouses and information centers were asked to provide information if they considered their activities and available resources relevant to school health, as defined above.

In all, staff from 112 Federal programs and 35 Federally supported clearinghouses or information centers identified their activities as relevant to school health. This information is compiled in this publication under *Part 1: Programs and Activities, and Part* 2: *Clearinghouses and Information Centers.*

The committee sees at least three uses for this compilation of information. First, to disseminate information about Federal programs related to school health to promote coordination and collaboration, where appropriate, to reduce duplication, and to identify and fill gaps in programming. Second, to respond to increasing interest from Congress regarding the scope of Federal activities related to school health. Third, and perhaps most important, to aid those working at the level of the school district, individual school, and classroom, who are planning, implementing, and evaluating school health programs. This volume provides information about Federal programs which may offer potentially useful resources, including publications and other materials, to address various components of school health programs.

While the committee made every attempt to gather the full range of relevant information, there were undoubtedly relevant programs which did not respond to the requests for information or which were not identified. A form for providing additional information is included at the end of this publication. It is hoped that programs not included initially will provide this information to the committee.

The Federal Interagency Ad Hoc Committee on Health Promotion Through the Schools



PART 1

PROGRAMS ANDACTIVITIES

	-	

Nutrition Education and Training Program

Areas of Emphasis

• Health Education

Curricula Personnel training

Program strategies, approaches, media

Subject Matter:
Nutrition

• Nutrition/Healthy School Food Services

Target Groups

Students

Preschool High school Elementary Students with special needs/special education

Middle school/junior high

- Parents
- Faculty and Staff (School Food Service Personnel)
- Out-of-School, High-Risk Youth
- community

Program Profile

The Nutrition Education and Training Program (NET) was originally authorized by the Child Nutrition Act, as amended by Public Law 95-166. Public Law 101-147 reauthorized the program for a **5-year** period, Fiscal Years 1990 through 1994.

The purpose of NET is to encourage good eating habits and teach children and parents the relationship between food and health; to train food service personnel in nutrition and food service **management** and to encourage the use of the cafeteria as an environment for learning about food and nutrition; to instruct educators in nutrition and in the use of the cafeteria as a learning laboratory; and to develop appropriate educational materials and curricula.

In the first two years of funding the annual appropriation was \$26.2 million, providing the authorized 50 cents per child based on school enrollment data for each State, with a minimum state grant of no less than \$75,000. With a decrease in funding levels in **succeeding** years to a level of \$5 million, the rate per child was adjusted downward accordingly and the minimum State grant lowered to \$50,000 by an amendment to the regulations in 1987. Public Law 101-147 authorized incremental annual increases in funding beginning in **FY90** to a top level of \$25 million in FY93 and FY94. The minimum grant level would increase, accordingly, on an incremental basis each year to **\$75,000** in any year when the funding level is \$20 million or more. The appropriation was increased to \$7.5 million in FY91, and the minimum grant was increased to \$56,250.

NET participation data reported for FY89 showed that the program instructed over 60,000 food service personnel, approximately 67,000 teachers, and close to 4 million children.

The Nutrition Education and Training Coordinator in each State develops plans with priorities to meet the identified needs for each target group.

Materials

• The Food and Nutrition Information Center (FNIC), National Agricultural Library, serves as the official repository for materials produced with NET funds. Two bibliographies provide information on the collection at FNIC: *Promoting Nutrition through Education, A Resource Guide to the Nutrition Education and Training Program (NET)*, Bibliographies and Literature of Agriculture, Number 31, August 1984, and *Promoting Nutrition through Education, A Resource Guide to the Nutrition Education*, Supplement 1, Number 89, September 1989.

Available from: See program contact listed below.

For additional information, contact:

Mr. Joseph E. Shepherd Director Nutrition and Technical Services Division Food and Nutrition Service U.S. Department of Agriculture 3 101 Park Center Dr., Room 607 Alexandria, VA 22302

Phone: 703/305-2585 Fax: 703/305-2549

National School Lunch and Breakfast Programs

Areas of Emphasis

• Health Education

Subject Matter: Nutrition

• Nutrition/Healthy School Food Services

Target Groups

Students

Preschool Hi; school Elementary

Middle school/junior high

• Faculty and Staff

Program Profile

These programs are authorized by the National School Lunch Act (National School Lunch Program) and by the Child Nutrition Act (School Breakfast Program).

The purpose of these programs is to safeguard the health and well being of the Nation's children through the service of nutritious school lunches and breakfasts and to increase consumption of domestic agricultural products.

The program began in 1946; \$4.5 billion was expended in FY89. The National School Lunch Program currently operates in 91,000 schools. Almost all school children have access to the National School Lunch Program; free and reduced-price meals are provided for needy children.

Materials

State education agencies, which operate the School Breakfast Program and the National School Lunch
Program at the local level, are primarily responsible for development of publications or other such
materials.

Available from: See program contact listed below.

For additional information, contact:

Director, Child Nutrition Programs Food and Nutrition Service U.S. Department of Agriculture 3101 Park Center Dr. Alexandria, VA 22302

Phone: 703/305-2590

Child and Adult Care Food Programs

Areas of Emphasis

• Health Education Information

Subject **Mutter:**Nutrition

• Nutrition/Healthy School Food Services

Target Groups

• Students
Preschool

Elementary

Program Profile

The Child and Adult Care Food Program is authorized by the National School Lunch Act, as amended. The program's purpose is to provide nutritious meals and snacks to children in child care centers and family day care homes.

This is an entitlement program funded annually through general appropriations. This program has been feeding children in care since 1968; it feeds approximately 1 million children each day.

Materials

ullet f A Fact Sheet on the Child Care Food Program

Available from: Child Nutrition Division, FNS/USDA, 3101 Park Center Dr., Alexandria, VA 22302

For additional information, contact:

Director, Child Nutrition Division Food and Nutrition Service U.S. Department of Agriculture 3101 Park Center Dr. Alexandria, VA 22302

Phone: 703/305-2590

Nutrition Guidance for Child Nutrition Programs

Areas of Emphasis

• Nutrition/Healthy School Food Services

Target Groups

• U.S. Department of Agriculture Child Nutrition Program Cooperators

Program Profile

The Child Nutrition and Women, Infants, and Children Reauthorization Act of 1989 requires the Secretary of Agriculture **and** the Secretary of Health and Human Services to jointly develop a publication to be entitled, **Nutrition Guidance for Child Nutrition Programs. This** publication will be distributed in Spring 1992, to all school food service authorities, institutions, and **organizations** participating in the Child Nutrition Programs.

The target audience, approximately 275,000 program cooperators, varies from food service directors of large multi-unit school systems to **family** day care providers in a home setting.

This nutrition guidance, developed jointly by the U.S. Departments of Agriculture and Health and **Human** Services, gives nutrition advice to those responsible for preparing meals for children under the Child Nutrition Programs. This guidance is based on *Nutrition and Your Health: Dietary Guidelines for Americans, third* edition, 1990, which provides advice for healthy Americans ages 2 and over-not for younger children and infants, whose dietary needs differ.

Nutrition Guidance for Child Nutrition Program is the first in a series of revised technical assistance efforts to help food service personnel and other persons responsible for feeding children improve children's health by offering meals in the Child Nutrition Program that reflect current dietary guidelines.

Materials

• Nutrition Guidance for Child Nutrition Programs (booklet)

Available from: See program contact listed below.

For additional information, contact:

Cynthia Ford, **PhD**Branch Chief, Technical Assistance
Food and Nutrition Service
U.S. Department of Agriculture
3101 Park Center Dr., Room 608
Alexandria, VA 22302

Phone: 703/305-2556

Human Nutrition Program

Areas of Emphasis

• Health Education Curricula

Subject Matter:

Nutrition Home economics

Target Groups

Students

Middle school/junior high High school

Program Profile

Activities of this division include development of a teaching kit including:

- Nutrition and Your Health: Dietary Guidelines for Americans (brochure)
- **Dietary Guidelines and Your Diet (series** of 7 bulletins describing how to implement each of the Dietary Guidelines)
- **Dietary Guidelines and Your Diet: Home Economics Teacher's Guide** (curriculum guide presenting objectives, key points, learning activities, and reproducible activity masters for nine lessons)

NOTE: A similar teaching kit designed specifically for the health education curriculum in secondary schools is targeted for release in Spring 1992. Distribution plans are currently being coordinated by **HNIS/USDA** and the Association for the Advancement of Health Education (AAHE). It is anticipated that single copies will also be available free to junior and senior high school health education teachers.

Materials

Single copies of the materials listed above are available free to junior and senior high school home economics teachers who write on school letterhead stationery.

Available from: Teaching Kit, P.O. Box 90723, Washington, DC 20090-0723

For additional information, contact:

Alyson Escobar Nutritionist Human Nutrition Information Service U.S. Department of Agriculture 6505 Belcrest Rd., Room 353 Hyattsville, MD 20782 Phone: 301/436-5194 Fax: 301/436-5496

School Health-Related Activities

Areas of Emphasis

*Health Education

Curricula Program strategies, approaches, media

Subject **Matter**:

Comprehensive health Alcohol or other drugs Cardiovascular health

education

Violence/conflictInjuries/safetyEnvironmentNutritionTobaccoCancerDental HealthLife skillsFamily lifeHIV/AIDSPhysical fitness

• Health Services

Immunizations School nursing Screening

Counseling/mental health School-based health services

School as a Healthy Environment

Safety Asbestos abatement

• Nutrition/Healthy School Food Services

• Physical Education/Fitness/Sports/Recreation

• Worksite Health Promotion for Faculty and Staff

School and Community Health Promotion

Target Groups

Students

Preschool Elementary Middle school/junior high

High school Students with special needs/special education

Parents

• Faculty and Staff

• Out-of-School, High-Risk Youth

Program Profile

The Department of Defense Dependents Schools provides a comprehensive health and physical education curriculum to approximately 10,000 students in grades kindergarten through high school in 20 countries. The

health curriculum provides instruction in all areas of health including nutrition, socially **transmitted diseases**, and physical fitness. The health coordinators have recommended that all Department of Defense **Dependents** Schools faculty participate with students in the fitness activities. The schools operate as a part of the **Defense** Department and are required by congressional mandate to maintain instruction comparable to the **best** schools in the continental United States.

Materials

• A Health Manual is currently being developed.

Available from: See program contact listed below.

For additional information, contact:

Shirley Griggs
Physical Education/Health Coordinator
Department of Defense Dependents Schools
2461 Eisenhower Ave.
Alexandria, VA 22331

Phone: 703/746-7868

Navy Personal Excellence Partnership Program

Areas of Emphasis

• Health Education

Subject Matter:

Alcohol or other drugs
Tobacco
Injuries/safety
Life skills

Nutrition Physical fitness

• Physical Education/Fitness/Sports/Recreation

Target Groups

Students

Preschool High school Elementary

Middle school/junior high

Program Profile

In 1985, the Navy established a Personal Excellence Partnership Program to address the growing gap between the skills of young people entering the workforce and the high-tech requirements of employers, including the Navy. The program embodies a whole person approach to **excellence—education**, health promotion, and **citizenship**. This mind, body, and spirit approach is unique among the Nation's school partnerships. Currently, the Navy's program is reaching over 150,000 young people, preschool through twelfth grade, in schools and youth organizations nationwide. There are more than 790 school partnerships involving over 17,000 military and civilian volunteers. Navy men and women assist students by serving as tutors, mentors, and role models. They also conduct lectures, workshops, fitness runs, **health** fairs, computer training, and community service experiences. The Navy encourages its local commands to collaborate with public and private sector organizations to maximize the use of all available resources. Additionally, such collaboration empowers the community to chart its own course of action for youth excellence.

A headquarters office at the Bureau of Naval Personnel provides policy guidance and technical assistance to the fleet. Coordination of Navy-wide efforts occurs through regional and local personal excellence partnership coordinators. Navy partnerships support President Bush's call for volunteerism, the National Health Promotion and **Disease** Prevention Objectives for the Year 2000, and the National Education Goals. The White House and Congress have recognized the Navy as a leader in partnership efforts. Five Navy partnerships have been designated as the President's "Daily Points of Light." The Navy is committed to working with our young people to help them reach their highest potential as well-educated, healthy, and fit **citizens**, motivated to serve others and able to enter any workforce.

For additional information, contact:

Dr. Alice McGill Personal Excellence and Partnership Division Naval Military Personnel Command Washington, DC **20370-5000** Phone: **703/614-** 1290

Family Advocacy Program

Areas of Emphasis

Health Education

Infomlation Personnel training Program strategies,

approaches, media

Subject Matter:

Violence/conflict resolution Injuries/safety Child and spouse abuse

• Health Services
Counseling/mental health

School and Community Health Promotion

• Worksite Health Promotion for Faculty and Staff

Child and Spouse Abuse Research

Target Groups

Students

Preschool Elementary Middle school/junior high

High school Students with special needs/special education

Parents

Faculty and Staff

• Out-of-School, High-Risk Youth

community

Program Profile

The Department of Defense Family Advocacy Program (FAP) conducts programs in the Army, Navy, Marine Corps, and Air Force to help families overcome the effects of child and spouse abuse. The mission is to provide prevention, identification, treatment, and reporting in crises involving child abuse and spouse abuse. The common goal is to prevent abuse whenever possible, to recognize abuse when it exists, and to provide competent treatment for all family members where appropriate. FAP education and awareness efforts have been extensive, but as the program continues to grow, prevention of abuse will increasingly become the major goal. Child and spouse abuse incident data are forwarded from installations and medical activities to the three service central registries, then submitted to the Office of the Secretary of Defense semi-annually. The continued education of service professionals begins with a two-week, joint-Service Family Advocacy Staff Training course for all new FAP personnel. Additional training occurs with the establishment and operation of a

Department of Defense team in response to the alleged child sexual abuse incidents in Department of Defense sanctioned 'out-of-home' care settings. During the last few years, a Family Advocacy Quality **Assurance** and Standards plan for the Department of Defense was developed and implemented, a national hotline for individuals to report child abuse or safety violations in military child development centers or family child care homes was developed, criminal history background **checks** were conducted on individuals working with children, increased coordination occurred with the other Federal agencies conducting prevention and intervention programs for children, while military commanders continued to seek assistance from local Child Protective **Services** Agencies.

The Department operates an information clearinghouse for military families and the professionals who serve them. Some materials provided are appropriate for teachers and other school professionals.

For additional information, contact:

Dr. JanaLee Sponberg
Office of Family Policy, Support, and Services
Department of Defense
Ballston Tower #3, Suite 903
4015 Wilson Blvd.
Arlington, VA 22203-5 190

Phone: 703/696-4555 FAX: 703/696-6344

Child Development Programs

Areas of Emphasis

Health Education

Curricula

Information

Personnel training

Program strategies, approaches, media

Subject Matter:

Injuries/safety Dental health Consumer education **Environment** Life skills

Nutrition Physical fitness

Health Services

Screening

Immunizations

• School as a Healthy Environment Asbestos abatement

Safety

Drinking water lead

- Nutrition/Healthy School Food Services
- School and Community Health Promotion
- Physical Education/Sports/Recreation
- Worksite Health Promotion For Faculty and Staff
- Coordination

Target Groups

Students

Preschool

Elementary

Students with special needs/special education

- Parents
- Faculty and Staff
- . community

Program Profile

Child Development Services (CDS) are provided for children 6 weeks through 12 years of age at 640 installations worldwide and include 738 child development centers and over 10,000 Family Day Care Homes. Over 150,000 children are served annually in these programs. The programs are funded with a combination of appropriated fund dollars and nonappropriated funds (parent fees). The program is designed to provide fullday, part-day school-aged, and hourly care for dependents of military and civilian employees of the **Department** of Defense. Department of Defense Instruction **(DoDI)** 6060.2 "Child Development Program" **establishes** policy, assigns responsibility, and prescribes **standards** and operating procedures for the program. Public **Law** 101-189, The Military Child Care Act of 1989, prescribes funding and other program **requirements**.

Military Child Development Programs follow United States Department of Agriculture Child Care Food Program guidelines for nutrition. All personnel working in CDS are training extensively in health procedures; nutrition; and child development including physical, emotional, social, and cognitive development. Immunizations and health screening are required and are completed by the installation Military Medical Treatment Facility.

For additional information, contact:

Linda K. Smith
Director of Child Development Programs
OASD (FM&P) (FSE&S)/OFP&S
4015 Wilson Blvd.
Ballston Tower #3, Suite 903

Arlington, VA 22203-5 190 Phone: **703/696-4555**

FAX: 703/696-6344

Comprehensive School Health Education Program

Areas of Emphasis

• Health Education

Curricula

Personnel training

Program strategies, approaches, media

Evaluation and/or dissemination of successful programs

Subject Matter:
Comprehensive health
education

- Physical Education/Fitness/Sports/Recreation
- Worksite Health Promotion for Faculty and Staff
- School and Community Health Promotion

Target Groups

Students

Elementary Students with special needs/special education Middle school/junior high

High school

- Parents
- Faculty and Staff
- community
- State Education Agencies/Professional Associations and Organizations

Program Profile

This program is authorized under the Secretary's Fund for Innovation in Education, P.L. 100-297, section 4695, April 28, 1988.

This program provides funds for assistance to State and local educational agencies, institutions of higher education, private schools, and other public **and private** agencies, organizations and institutions for a broad variety of activities related to improving health education for elementary and secondary students. Activities **may**

include programs providing training of school personnel who will implement health education programs, the development of comprehensive school health education programs, the assessment of school health education programs, the identification and dissemination of model school health education programs, and/or the dissemination to schools of information related to nutrition, personal health and fitness, disease prevention, accident prevention, and community and environmental health, and other urgent health problems affecting **school**age youth.

The program currently supports innovative projects of national significance. Key groups conducting these innovative programs include State agencies, university-school system partnerships, national educational associations, regional educational laboratories, and numerous local educational agencies. Well over half of the programs cover the full K-12 school spectrum, whereas other programs focus on elementary school or on secondary school. Although the target for most of the projects is the total student population, some priority is given to the underrepresented and underserved. Similarly, although the majority of projects are directed at general statewide needs, they collectively include urban models, suburban models, and rural models.

Two national technical assistance workshops are held aunually for project leadership teams and leaders from a broad array of major national agencies and organizations from the private and public sectors concerned with comprehensive school health **education—one** in the fall in Washington and one in the spring in cooperation with the annual National Conference of the American Alliance for Health, Physical Education, Recreation, and Dance and the American Alliance for Health **Education**.

Meetings are regularly held with representatives of other major health education programs. both within the government and in the field, to share information and develop cooperative activities.

The primary emphasis in the new competitions will be on demonstrating and evaluating promising approaches to comprehensive school health education and providing the training needed to implement such programs, and spreading the impact of effective comprehensive school **health** education programs.

The program coordinator co-chairs the Federal Interagency Ad Hoc Committee on Health Promotion Through the Schools. A detailed summary of other program accomplishments is available from the program office.

Materials

 Comprehensive School Hedth Education Program: Abstracts of the 1989 and 1990 Awards and Key Contact Directory

Available from: See program contact listed below.

For additional information, contact:

Director, Comprehensive School Health Education Program U.S. Department of Education Suite 522
555 New Jersey Ave., NW Washington, DC 20208

Phone: 202/219-1596

National **Diffusion** Network

Areas of Emphasis

Health Education

Curricula Personnel training Program **strategies**,

approaches, media

Middle school/junior high

Subject Matter:

Comprehensive health Alcohol or other drugs Cardiovascular health

education

Nutrition Tobacco Cancer

Family life HIV/AIDS Physical fitness

• Physical Education/Fitness/Sports/Recreation

School and Community Health Promotion

Target Groups

Students

Preschool Elementary
High school Students with special

Students with special needs/special education

Parents

• Faculty and Staff

• Out-of-School, High-Risk Youth

. community

Program Profile

The National Diffusion Network **(NDN)** is a Federally funded system that makes exemplary educational programs available for adoption by schools, colleges, and other institutions.

It does so by providing dissemination funds to exemplary programs, called Developer Demonstrator projects, for two purposes: (1) to make public and nonpublic schools, colleges, and other institutions aware of what they offer and (2) to provide training, materials, and **followup** assistance to schools and others that want to adopt them.

NDN also provides funds to State facilitators, whose job is to serve as matchmakers between NDN programs and schools and organizations that could benefit from adopting the programs.

NDN program directors help **local** schools implement their programs to suit each school's unique needs. To do that, the director of the program provides training, lasting from one day to a **week** or more, to staff members in the adopting school. The director also provides **followup** assistance in the form of additional training, visits, telephone consultation, and newsletters. Sometimes, **a** program director or a State facilitator arranges for all adopters of a particular program in **a** region or State to form a network so they can share successful approaches and solve common problems. All NDN services are provided at little or no cost to adopters.

Before a program **can become** eligible for funding as a part of the NDN, it must be approved by the **Department** of Education. A program requesting a review must provide evaluation data that prove that the program is effective in the school in which it was developed or field tested, and that it could be **used** successfully in other schools. As of December 1987, approximately 450 programs had been approved and 82 of them were receiving Federal dissemination funds to help other schools adopt them.

NDN programs can meet the needs of students of every age-preschool through adult-and the needs of teachers, administrators, and other school personnel. Subject areas represented among the NDN programs include mathematics, science, and reading. There are also programs in writing, technology, the humanities, and for gifted and talented students.

Some programs are designed to improve **preservice** and **inservice** teacher training. Other fields represented include special education, career and vocational education, adult literacy, early childhood education, health and physical education. Some programs are directed toward processes to improve school administration and management and thereby improve instruction. There are **currently** some 15 health and physical education programs in NDN.

Materials

- Education Programs That Work
- Health and Physical Education Program in the National Diffusion Network

Available from: See program contact listed below.

For additional information, contact:

Linda Jones National Diffusion Network Office of Education and Research and Improvement 555 New Jersey Ave., **NW**, Room 510 Washington, DC 20208-5645

Phone: 202/219-2134

Drug-Free Schools and Communities: Drug-Free School Recognition Program

Areas of Emphasis

 Health Education Information

Subject Matter:
Alcohol or other **drugs**

Target Groups

Students

Elementary

Middle school/junior high

High school

- Parents
- Faculty and Staff
- . community

Program Profile

The Drug-Free School Recognition Program operates in a manner similar to the department's Blue Ribbon Schools. Applications from nominated schools are reviewed by a panel of specialists, and those rated as most promising are each visited by a two-person team. The schools finally selected for recognition are honored at ceremonies in Washington, DC. One hundred and eighty-six schools have been recognized since the program began in 1987.

The program operates under the authority of the Drug-Free Schools and Communities Act, P.L. **99-570,** P.L. 100-297, and P.L. 101-226, with funding from the Department's Federal Activities funds.

James Better Staff Director Drug-Free School Recognition Program
Office of Educational Research and Improvement
555 New Jersey Ave., NW Suite 510 Washington, DC 20208 Phone: **202/219-2144**

Drug-Free Schools and Communities: Early Childhood Education Drug Prevention

Areas of Emphasis

• Health Education

Curricula

Information

Program strategies, approaches, media

Subject Matter: Alcohol or other drugs

Target Groups

Students

Preschool

• Faculty and Staff

Early childhood educators

Caregivers

• Parents

Program Profile

This program, authorized by the Anti-Drug Abuse Act of 1988 will support the development of **drug** abuse education and prevention curricula, programs, and training materials for use in early childhood education. Under this project the Department of Education will support contracts to develop prevention materials for young children and their parents and **caregivers.** Once developed, these materials will be widely disseminated.

This program operates under the authority of the Anti-Drug Abuse Act of 1988 with \$1,000,000 funding from the Department of Education's Federal Activities **Budget** between **FY89** and FY94.

Barbara Lieb
Programs for the Improvement of Practice
Office of Educational Research and Improvement
U.S. Department of Education
555 New Jersey Ave., NW
Washington, DC 20208

Phone: **202/2** 19-2 187

Drug-Free Schools and Communities: State and Local Formula Grant Program

Areas of Emphasis

Health Education

Curricula Personnel training

Program strategies, approaches, media

Subject Matter:

Alcohol or other drugs Comprehensive health education Violence/conflict resolution

Tobacco

Life skills

Target Groups

• Students

Elementary Students with special needs/special education Middle school/junior high

High school

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community

Program Profile

The **purpose** of this program is to provide financial assistance to States and local education agencies for alcohol **and** drug abuse education and prevention programs.

This is a formula grant program which allocates funds to States taking into account school-age population and Chapter 1 funding. Each State's allocation is divided between the State Educational Agency (SEA) and the Office of the Governor. SEA must allot at least 90 percent of the funds it receives to local educational agencies to improve **anti-drug** abuse education, prevention, early intervention, and rehabilitation referral programs. The Governor provides financial support for anti-drug abuse efforts to parents' groups, community-based organizations, or other public or private nonprofit entities. At least 42.5 percent of the Governor's funds must be used for programs for high-risk youth, 10 percent for Drug Abuse Resistance Education Programs, and **5** percent for the Replication of Successful **Drug** Education Programs. There are contacts in each State for the programs funded through the Governor's office and programs funded through SEA.

Michelle Padilla Education Program Specialist Division of Drug-Free Schools and Communities U.S. Department of Education 400 Maryland Ave., SW, Room 2123 Washington, DC 202026439

Phone: 202/401-1599 Fax: 202/401-1112

Drug-Free Schools and Communities: Emergency Grants

Areas of Emphasis

• Comprehensive range of prevention services related to alcohol and other drugs

Target Groups

• Students Elementary

Middle school/junior high

High school

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- community

Program Profile

This program provides funds to school districts that demonstrate a significant need for additional assistance in combatting drug and alcohol use. The program was administered by Governors under the Durg-Free Schools and Communities Act State grants authority in 1990 and as a Federal discretionary program beginning in 1991. In 1991, districts competed for funding to support a comprehensive range of services, including educational programs, counseling programs, enhancement of school security, after-school programs, programs for parents and other community outreach efforts, and alternative programs for students with a history of drug abuse or others who are difficult to reach in the regular school setting. Grants ranged from \$100,000 to \$1,000,000.

The program is authorized under P.L. 101-226.

For additional information, contact:

Ruth Tringo
Education Program Specialist
Division of Drug-Free Schools and Communities
U.S. Department of Education
400 Maryland Ave., SW, Room 2123
Washington, DC 202024439

Phone: **202/401-1258** Fax: 202/401-1112

Drug-Free Schools and Communities: Innovative Alcohol Programs

Areas of Emphasis

Health Education
 Curricula
 Program strategies

Program strategies, approaches, media

Subject Matter:
Alcohol or other drugs

Information

Personnel training

Target Groups

• Students Elementary

Middle school/junior high

community

Program Profile

This program, authorized by the Anti-Drug Abuse Act of 1988, funds projects to develop materials for programs of alcohol abuse education. The materials will be targeted to particularly benefit students in grades 5 through 8 and will focus on the effect of alcoholism on families and especially on children of alcoholics. In FY91, funds for this program supported grants to train educators about the special problems such children may have and to use the materials developed from the first year of funding.

Madeline **Bosma**Education Program Specialist
Division of Drug-Free Schools and Communities
U.S. Department of Education
400 Maryland Ave., SW, Room 2123
Washington, DC 202026439

Phone: **202/401-1258** Fax: 202/401-1112

Drug-Free Schools and Communities: School Personnel **Training**

Areas of Emphasis

Health Education

Personnel training

Subject Matter:

Alcohol or other drugs

Target Groups

Faculty and Staff

Program Profile

The School Personnel Training Grants Program is authorized by the Drug-Free Schools and **Communities** Act. The purpose of this program is to provide financial assistance to State educational agencies, local educational agencies, and institutions of higher education to establish, expand, or enhance programs and activities for the training of teachers, administrators, guidance counselors, and other school personnel including social workers, psychologists, nurses, librarians, and support staff on drug and alcohol abuse education and prevention. **One** hundred and seventy-six awards were made in 1990.

For additional information, contact:

Ethel Jackson
Education Program Specialist
Division of Drug-Free Schools and Communities
U.S. Department of Education
400 Maryland Ave., SW, Room 2123
Washington, DC 20202-6439

Phone: 202/401-1258 Fax: 202/401-1 112

Drug-Free Schools and Communities: Program for Indian Youth

Areas of Emphasis

Health Education

Curricula

Information

Personnel training

Program strategies, approaches, media

Subject Matter:

Alcohol or other drugs

• Health Services

Counseling

Drug Abuse Prevention

- School as a Healthy Environment Drug abuse prevention
- School and Community Health Promotion
- Drug Abuse Prevention Training for Students, Parents, Faculty, and Staff

Target Groups

Students

Elementary

Middle school/junior high

High school

• Native American Students iu BIA-operated Schools

Program Profile

This program is authorized by the Drug-Free Schools and Communities Act 1986, Title V, Part A, Sections 5112 and 5133.

This program is administered under a Memorandum of Understanding between the Departments of Education and Interior. Anti-alcohol and drug abuse education and prevention services are provided to Indian children attending elementary and secondary schools which are operated by the Bureau of Indian Affairs (BIA) on reservations.

Kimberly Light
Education Program Specialist
Division of Drug-Free Schools and Communities
U.S. Department of Education
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Washington, DC 202026439
Phone: 202/401-1599

Fax: 202/401-1112

Drug-Free Schools and Communities: Grants for Institutions of Higher Education

Areas of Emphasis

Health Education
 Curricula
 Program strategies,

Information

Personnel training

approaches, media

Subject Matter: Alcohol or other drugs

Target Groups

• Students
Elementary

Middle school/junior high

High school

- Parents
- Faculty and Staff
- community

Program Profile

This is a competitive grants program that makes awards to institutions of higher education to support demonstration programs in drug **and** alcohol abuse education and prevention in elementary and secondary schools. Twenty-one awards were made in 1990.

Seledia Shephard Education Program Specialist Division of Drug-Free Schools and Communities U.S. Department of Education 400 Maryland Ave., SW, Room 2123 Washington, DC 20202-6439

Phone: **202/401-1258** Fax: 202/401-1**112**

Drug-Free Schools and Communities: Hawaiian Natives Program

Areas of Emphasis

Health Education

Curricula Information Personnel training

Program strategies, approaches, media

Subject Matter:

Alcohol or other drugs Life skills

Health Services

Counseling

• School as a Healthy Environment

Drug-free environment

- School and Community Health Promotion
- Worksite Health Promotion for Faculty and Staff

Target Groups

• Students

Elementary Middle school/junior high High school

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community
- Hawaiian Natives

Program Profile

The Hawaiian Natives Program provides funds to organizations recognized by the Governor of Hawaii for drug programs benefiting Hawaiian native children and adults.

The authority for the program is Section 5134 of the Drug-Free Schools and Communities Act of 1986, as amended.

Since the program's inception, the Governor has chosen one applicant for the grant, the Kamehameha Schools. The grantee provides training, curriculum development, and other drug prevention activities for Hawaiian native children and adults.

For additional information, contact:

Kimberly Light
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Division of Drug-Free Schools and Communities
U.S. Department of Education
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Washington, DC 202024439

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Drug-Free Schools and Communities: Regional Centers

Areas of Emphasis

Health Education

Information

Personnel training

Program strategies, approaches, media

Subject Matter:
Alcohol or other drugs

Target Groups

- Parents
- Faculty and Staff
- community
- Inner City Team Training

Program Profile

Under the Regional Centers Program, the Department of Education awarded five cooperative agreements in **FY90** for four years to **fulfill** the requirements of the act. The law authorizes the department to support these regional centers to: (1) train school teams to assess and combat drug and alcohol abuse problems, (2) assist State educational agencies in coordinating and strengthening alcohol and drug abuse education and prevention programs, (3) assist local educational agencies and institutions of higher education in developing training programs for educational **personnel**, and (4) evaluate and disseminate information on effective substance abuse prevention education programs and strategies.

A portion of the funds under the Regional Centers Program has been set aside for a project to provide support to the five regional centers in carrying out their responsibilities. Activities for this project include collecting and disseminating information on regional center activities, collecting and disseminating information on model alcohol and drug education and prevention activities, and coordinating and supporting national workshops and conferences.

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Drug-Free Schools and Communities: Federal Activities Grants

Areas of Emphasis

• Health Education

Curricula Program strategies, approaches, media

Subject **Matter:** Alcohol or other drugs

Information

Personnel training

Target Groups

• Students

Elementary

Middle school/junior high

High school

- Parents
- Faculty and Staff
- . community

Program Profile

Funding for this program comes from discretionary funds provided to implement Section 5132 of the Drug-Free Schools and Communities Act.

Drug-Free Schools and Communities Staff in the Office of Elementary **and** Secondary Education under its Federal Activities Grant Program supports model program development, dissemination, technical assistance, and curriculum development activities for drug and alcohol abuse education and prevention. Over one hundred and fifty awards have been made since FY87 to State educational agencies; local educational agencies; institutions of higher education; and other nonprofit agencies, organizations, and institutions.

Materials

- Say No To Crack (Informational poster for elementary school students featuring McGruff)
- Crack Shatters Lives (Poster for high school students)

- Steroids Mean Trouble (Poster for junior and senior high school students)
- **Growing Up Drug Free-A Parent's Guide to Drug Prevention (Booklet that** helps parents understand the important role they play in preventing youth alcohol and other drug use. Includes information on activities that parents may use in talking with their children about drug use)
- How To Say No (Poster for students aged 8 to 12)
- **Schools Without Drugs** (Pamphlet that provides the latest information to educators and other members of the community about alcohol and other drugs and their effects, as well as examples of school-based prevention programs that have successfully combatted student alcohol and drug use)
- Drug Prevention Curricula: A Guide to Selection and Implementation (Booklet that provides information to parents, community leaders, and educators about selecting and implementing alcohol and other drug prevention curricula for school-based prevention programs)
- Learning to Live Drug Free: A Curriculum Model for Prevention (A flexible framework for classroom-based prevention efforts in kindergarten through grade 12, this publication provides lesson plans and teacher information. The curriculum model includes prevention lessons that can be taught in social studies, language arts, science, mathematics, health and physical education, art or music classes)

Available From: All Department of Education publications relating to alcohol and drug prevention are available from the National Clearinghouse for Alcohol and Drug Information, (800/729-6686) free of charge. Videos are available for loan from NCADI or for purchase from the National Audiovisual Center (800/638-1300).

For additional information, contact:

Gail Beaumont
Education Program Specialist
Division of Drug-Free Schools and Communities
U.S. Department of Education
400 Maryland Ave., SW, Room 2123
Washington, DC 202026439

Phone: 2021401-1258 Fax: 202/401-1112

Drug-Free Schools and Communities: Counselor Training Grants

Areas of Emphasis

- Health Education Personnel training
- Health Services School nursing

Counseling/mental health

Target Groups

- State and Local Education Agencies
- Institutions of Higher Education
- Nonprofit Agencies

Program Profile

This program provides financial assistance to State education agencies, local education agencies, institutions of higher education, or consortia of those agencies or institutions, to establish, expand, or enhance programs and activities for the training of counselors, social workers, psychologists, or muses who are **providing** or will provide drug abuse prevention, counseling, or referral services in elementary and secondary schools. The Secretary of Education may also make a grant under this program to any private nonprofit agency that has an agreement with a local educational agency to provide training in drug abuse counseling for individuals willing to provide **counseling** to schools for a local educational agency.

FY91 was the first year of this competition. Funding for these grants is estimated to be \$4,155,000 in FY91 and \$3,400,000 in FY92, with individual grants ranging from \$50,000 to \$100,000.

Director, Division of Drug-Free Schools and Communities Department of Education

Office of Elementary and Secondary Education
400 Maryland Ave., SW

Washington, DC 202026439

Phone: 212/401-1258

Migrant Education Programs

Areas of Emphasis

- Health Services
- Nutrition

Target Groups

Migrant Students

Program Profile

Migrant farmworkers and their families are an especially high-risk, hard-to-reach population. They are often subject to extreme poverty, malnutrition, unsanitary and crowded living conditions, and poor health care. The mobile **nature.of** the migrant family also makes it difficult to ensure the education of migrant children. Compounding these problems are barriers that limit access to available services such as lack of transportation, language barriers, lack of information about available services, and **the** disruption due to **frequent moves.** It is important for this special population to have access to ongoing health care, proper nutrition, and economic and educational opportunities.

Several programs of the Office of Migrant Education address these issues.

The Part A, Section 1201 State Basic Grant Program is authorized under Chapter I of Title I of the Elementary and Secondary School Improvement Act of 1965 as amended by the 1988 Hawkins-Stafford School Improvement Act. This program provides funds to State educational agencies (SEAs) for compensatory education services to children of migrant agricultural workers and fishermen. In addition, health, nutrition, and psychological services; prevocational training and counseling; and other instructional programs in language arts may be funded.

Under Part B of Section 1201 of the Act, the Migrant Student Record Transfer System is authorized. This is a national computerized system operated by the Arkansas State Department of Education that receives, **stores**, and transmits educational and health data on migrant students who move from school district to school district.

The High School Equivalency Program (HEP) and the College Assistance Migrant Program (CAMP) are authorized under Title VI of the Higher Education Act. These programs provide funds to institutions of higher education (IHE) or private nonprofit organizations collaborating with IHE's for special educational programs designed for students who are, or whose parents are, engaged in migrant and other seasonal farmwork. The projects funded under HEP recruit and provide academic support services (including counseling, health services, stipends, and placement) to migrant students aged 17 and above to assist them to obtain a high school equivalency certificate and subsequently to gain employment). CAMP is designed to assist migrant students who are enrolled or are admitted for enrollment on a full-time basis in the first academic year at an IHE. This assistance includes outreach and recruitment, housing support, instructional support, financial aid, and other support services such as necessary health services and tutoring.

Migrant Education Coordination Programs for **SEAs** are created **under** Section 1203 of the Act. These programs are designed to provide financial assistance to **SEAs** for projects designed to improve interstate and intrastate coordination of migrant education activities among **SEAs and** local educational agencies. Mauy of the program funded under this section include a component on health education or plans to improve provision and access of health **services** to migrant children and their families.

The Migrant Education Even Start (MEES) program supports grants to eligible SEAs for the cost of providing family-centered education projects to help parents of currently migratory children become full partners in the education of their children, to assist currently migratory children in reaching their potential as learners, and to provide literacy training for their parents. Parent education includes information on the health and nutrition needs of children and the services available to eligible families in the State or locality.

For additional information, contact:

Ramon Ruiz Acting Director Office of Migrant Education U.S. Department of Education 400 Maryland Ave., SW Washington, DC 20202 Phone: 202/401-0740

Rehabilitation Research and Training Center for Children's Mental Health

Areas of Emphasis

- Health Services
 Counseling/mental health
- Research and Training

Target Groups

• Students
Students with special
needs/special education

Program Profile

Administered by the National Institute on Disability and Rehabilitation Research, this program is **authorized** under the Rehabilitation Act of 1973, as amended, to improve the delivery of services to children and adolescents with severe emotional disorders.

The purpose of this center is to conduct research and training that will improve the delivery of services to children and adolescents who have serious emotional disorders. The philosophy of the center is that systems of coordinated, community-based care are needed for this population of children and that these systems should be based on a clear set of values, develop a strong, empirically derived data base, and include the families of the children and the professionals from the multiple service systems that serve them, including the schools.

For additional information, contact:

L. Deno Reed
Department of Education
400 Maryland Ave., SW
Washington, DC 20202-2702

Phone: **202/732-** 1193 Fax: **202/732-5015**

Hearing Screening and Follow-up Program for Native Hawaiian Children

Areas of Emphasis

- Health Services screening
- Research and Demonstration

Target Groups

• Students
Student with special
needs/special education

Program Profile

Administered by the National Institute on Disability and Rehabilitation Research, this program is authorized under the Rehabilitation Act of 1973, as amended, to provide hearing screening of native Hawaiian children and follow the children audiologically. The children experience intermittent hearing losses, largely due to middle ear infections. The project will document hearing dysfunction, investigate etiological relationships, and study the relationship of hearing loss and audiological interventions to educational outcomes.

For additional information, contact:

L. Deno Reed
Director, Vocational Behavioral and Social Sciences
Department of Education
400 Maryland Ave., SW
Washington, DC 20202-2702

Phone: **202/732-** 1193 Fax: **202/732-5015**

Rehabilitation Research Training Center to Improve Services for Families of Children and Youth with serious Emotional Disturbances

Areas of Emphasis

Research

Target Groups

Students
 Students with special
 needs/special education

Program **Profile**

Administered by the National Institute on Disability and Rehabilitation Research, this program is authorized under the Rehabilitation Act of 1973, as amended, to conduct research that has practical application in the development, evaluation, and improvement of services for families whose children have emotional disorders. Program activities include the development and evaluation of strategies that will build the capacities of families, professionals, service providers, program administrators, and policymakers to establish services that are flexible and organized around individual families' needs.

For additional information, contact:

L. Deno Reed
Director, Vocational Behavioral and Social Sciences
Department of Education
400 Maryland Ave., SW
Washington, DC 20202-2702
Phone: 202/732-1 193

Prevention Research

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Subject Matter:

Violence/conflict resolution Life skills Family life

HIV/AIDS

Health Services

Counseling/mental School-based health services

health

• Worksite Health Promotion for Faculty and Staff

• School and Community Health Promotion

Target Groups

Students

Preschool Elementary
High school Students with special needs/special education

Middle school/junior high

• Parents

• Faculty and Staff

Out-of-School, High-Risk Youth

community

Program Profile

The Prevention Research Branch, Division of Clinical Research, National Institute of Mental Health funds research and research training on the prevention of mental disorders and the promotion of mental health. Included are studies of preventive intervention strategies which avoid or interrupt the development of dysfunctional conditions and/or improve individual adaptive capabilities. Research aimed at changing factors that place people at risk for mental disorders is supported, as are methodological studies especially relevant to preventive intervention research. Support is provided through a wide variety of research and research training mechanisms, and in FY90 totals approximately \$16.7 million.

Priority areas of interest to the branch are:

- The prevention of **socio-emotional** problems among preschoolers
- The prevention of conduct and other behavioral disorders in school-aged children
- The prevention of anxiety and depressive disorders in all ages
- The promotion of mental health through the enhancement of protective factors, including coping skills
- The prevention of suicide and suicidality in **preclinical** populations
- The prevention of affective and anxiety disorders in HIV-infected individuals, people at high risk for infection, their families, caretakers, and loved **ones**

For additional information, contact:

Doreen S. Koretz, **PhD**Acting Chief
Prevention Research Branch
National Institute of Mental Health
5600 Fishers Lane, Room **14C-03**Rockville, MD 20857

Phone: 301/443-4283

Child and Adolescent Service System Program

Areas of Emphasis

Health Services

Delivery of mental health **services** by States and communities

 Interagency collaborative approaches to coordination of community-based services to meet the needs of children and adolescents with serious emotional disturbances and their families; mental health service delivery

Target Groups

Students

Students with special needs/special education

- Parents
- Out-of-School, High-Risk Youth
- community

Program Profile

The legislative authority for the Child and Adolescent Service System Program (CASSP) is the mental health component of P.L. 100-960, Anti-Drug Abuse Act of 1988, Title II, Treatment and Prevention Programs, Section 520A (a).

CASSP is designed to improve systems for service delivery for children and adolescents with severe emotional disturbance, the primary goal of which is to improve and integrate the way diverse services are delivered to this population by States and communities. CASSP encourages the interagency coordination and planning of services as well as the development of a stronger mental health component within the broader **child** serving system. CASSP, through its Research and Training Centers and its Technical Assistance Center, pulls together the best research in the areas of **concern** and makes it available to service system administrators. Through State and community grant **programs**, CASSP then promotes the utilization of this research in the development of Statewide service system improvement strategies, and is included in the planning and development of new services and programs. CASSP requires that newly developed strategies and services be culturally sensitive to the needs of minority children and youth and that these populations participate in all aspects of service system development. Moreover, families of children and adolescents with severe emotional disturbance **are included** in the planning and implementation of service systems.

Currently in its seventh year, CASSP is, or has been, active in all **50** States, the Virgin Islands and the District of Columbia. It also **cofunds** two Research and Training Centers with the Department of Education's National Institute of Disability and Rehabilitation Research and cofunds a Technical Assistance Center with the Maternal and Child Health Bureau, Health Resources and Services Administration. The FY92 emphasis will be on the **continuation** of the State-level CASSP effort.

The Child and Adolescent Research Demonstration Program is the **newest** of the Child and Family Support Branch (CFSB) programs and represents a logical extension of the current CASSP efforts in service system development. The goal of this program is to support research on the efficacy of innovative service delivery approaches and systems of care for children and adolescent with, or at risk of, serious emotional disturbance and their families. The **first** grant announcements, issued in FY90, focused on: (1) the study of the expansion of State-level system developments to the **local** level; (2) the study of the impact of ongoing community-level service system development efforts **funded** by States and other sources; and (3) the study of the development of comprehensive services for homeless adolescents. To enhance the success of these projects, a strong emphasis has been placed on the formation of meaningful collaborations between university-based researchers and public **policymakers** in keeping with the 1988 National Institute of Mental Health Public-Academic Liaison Initiative. As a result of those **announcements**, several **fundable** R18 grants were produced and five have recently been awarded with the assistance of funds tapped for homeless demonstrations. CFSB is currently revising this successful request for application for **future** release.

Materials

CASSP Technical Assistance Documents Available

Available from: CASSP Technical Assistance Center, Georgetown University Child Development Center, 3800 Reservoir Rd., NW, CG-52 **Bles,** Washington, DC 20007.

For additional information, contact:

Grayson Norquist Deputy Director, Division of Applied Services and Research National Institute of Mental Health 5600 Fishers Lane Rockville, MD 20857

Evaluating Sexual Abuse Prevention Program

Areas of Emphasis

• Health Education

Subject Matter: Injuries/safety

• Prevention Program-Child Sexual Abuse

Target Groups

• Students
Preschool

Program Profile

This program in the Violence and Traumatic Stress Research Branch in the Division of Applied and Services Research in the National Institute of Mental Health (NIMH), Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA), administers grants in many areas of violent behavior, including sexual abuse in children.

The grant, "Evaluating Sexual Abuse Prevention **Program"** is a school-based, sexual abuse prevention program for preschool children. The principal investigator, Sandy K. Wurtele, is an assistant professor in the Department of Psychology at the University of Colorado at Colorado Springs.

This research has been funded by NIMH over a period of four years and is now in the fifth year. The study is investigating (1) the effectiveness of school-based, sexual abuse prevention programs for preschool children in developing knowledge which would enable children to reduce the risk of sexual victimization and (2) the potential negative consequences of participation in such programs.

Dr. Wwtele has written various journal articles and has completed both a study replicating results of earlier research comparing the "touch continuum" approach with the "private parts" approach with five-year-old children and a study evaluating the "private parts" approach with four-year-old children.

Materials

• Several journal articles have resulted from this project

Available from: See program contact listed below.

For additional information, contact:

Malcolm Gordon, **PhD**Research Psychologist
National Institute of Mental Health **Parklawn** Building, Room 18-105
5600 Fishers Lane
Rockville, MD 20857

Child and Adolescent Grant Program

Areas of Emphasis

• Health Education

Subject Matter: Mental health

- Health Services
 Counseling/mental health
- Mental Health

Target Groups

All Children and Adolescents

Program Profile

The Child and Adolescent Grant Program funds investigator-initiated research on mental health services for children and adolescents.

For additional information, contact:

Kathryn Magruder, PhD Assistant Branch Chief Services Research Branch National Institute of Mental Health 5600 Fishers Lane, Room 18C-14 Rockville, MD 20857

DHHS/Alcohol, Drug Abuse, and Mental Health Administration National Institute of Mental Health

Small Business Innovation Research

Areas of Emphasis

Health Education

Program strategies, approaches, media

Subject Matter:

Prevention/intervention

Sexual abuse

Program Profile

This program identifies four currently-funded projects relevant to school health.

Behavioral Treatment of St ess in Pediatric Patients. Research has shown behavioral interventions to be effective: n reducing stress and mitigating other problems experienced by children and adolescents undergoing medical treatment. However, the information needed to carry out these interventions in clinical setting is often not accessible to diit care providers. Phase II of this study will develop, evaluate, and refine eight videobased informational modules designed to (1) stimulate interest in behavioral solutions to problems in pediatrics and (2) encourage reproduction of procedures that have proven successful. These programs will focus on behavioral research in the areas of AIDS, ambulatory pediatrics, asthma, cancer, diabetes, obesity, pain control, and preparation for surgery. Each module will consist of a videotape and a printed user's guide and will be widely marketed in the United States and Canada to nurses, social workers, psychologists, pediatricians, educators, and professional groups interested in issues in children's health. The eight educational video modules developed under Phase II will be widely marketed to health professionals in the United States, Canada, and the United Kingdom by Carle Medical Communications in Urbana, IL. Additionally, it will he marketed to all groups interested in children's health.

Adolescent Problems: Prevention and Intervention. The purpose of the project is to develop, field test, and refine a media-based family program to promote healthy adolescent adjustment. The development of the program will be informed by findings from two decades of National Institute of Mental Health-funded research. Parent/adolescent skills will be the focus of videotapes and manuals that could be used (1) in prevention trials with large samples of unselected or at-risk families and (2) as adjunct materials for clinicians to use in treating disturbed families. Targeted consumers for post-small business innovation research funding will be parents, public school districts, family practice physicians, mental health specialists, and universities.

In Phase I, one module, a videotape and accompanying brochure designed to improve specific academic skills for adolescents in middle school will be produced and pilot tested. **Pre-** and postintervention data from parents, teachers, youngsters, and school records will be evaluated for experimental and control groups. Homework practices and quality, on-task classroom behavior, grades, attendance, discipline contacts, and child life skills will serve as dependent variables. Consumer satisfaction will also be evaluated.

In Phase II, additional and related modules will be developed and pilot tested, and finally, the set of modules will be field tested. Modules will focus on probable determinants for adolescents' involvement with deviant peer groups, substance abuse, delinquency, and depression. The set of materials will be developed and field tested with unselected, at-risk, and clinical populations referred because of school failure, antisocial behavior, substance abuse, peer problems, or depression. Potential commercial applications are planned for parents, public school districts, mental health specialists and facilities, universities, and home video cassette markets.

Video-based Skills for Urban Families. The project plans to develop a set of videobased skill programs for parents and young adolescents (11-14). The programs will adapt social learning parenting and teen behavior change skills to fit the ecological aud interpersonal situations of ethnically diverse urban families. Two urban consultation teams comprised of parents, teens, and community leaders will assist in developing the programs.

In Phase I, a parent tape teaching the skills of monitoring and supervising child behavior outside of the home, and an adolescent tape teaching the skills of handling pressure to engage in various antisocial **behaviors** will be developed and evaluated in Portland, OR. A consultation team will provide direction and feedback. Forty families will be recruited and their acquisition of targeted skills evaluated after two weeks. Subjects will also provide consumer satisfaction ratings.

During Phase II, the complete set of 6 parent and **6** adolescent video programs will be developed. A second urban site will be targeted and a consultation team formed. One hundred and twenty at-risk middle school youth and their parents will be recruited to evaluate the complete package. Markets for these complete packages **will** be explored and contacts established for eventual distribution of the program. The targeted consumers for these packages include: schools, community mental health facilities, churches, youth organizations, and parents.

Computer-Assisted Interviewing for Child Sexual Abuse. This project will develop an interactive-multimedia computer program to aid in interviewing children ages 3-8 to ascertain sexual abuse. The program will assist the interviewer by providing a framework for the interview and an environment that helps the child tell her or his story. It will also provide questions, suggestions, and in-service **training** for the interviewer. The program will provide separate modes appropriate for different developmental levels of the children within the target age range.

Interactive-multimedia programs communicate with animation, graphics, and sound, in addition to text. Even very young children who don't know how to read or use a keyboard can operate these easy-to-use programs. This technology will yield more information than traditional interviewing techniques, because it facilitates the child's nonverbal modes of communication and mitigates the child's distraction. In addition, interviewers from different disciplines will be able to utilize the technology's hypertext feature to select questions based on their specific needs and on the progress of the individual interview. The program is expected to reduce the number of interviews and therefore the stress on the child. Potential users include agencies **and** individuals that interview children to ascertain sexual abuse, such as mental health and legal professionals.

For additional information, contact:

J.E. Moynihan Program Officer National Institute of Mental Health 5600 Fishers Lane, Room 1 1-95 Rockville, MD 20857

DHHS/Alcohol, Drug Abuse, and Mental Health Administration National Institute on Drug Abuse

Community and Professional Education (AIDS, Another Way Drugs Can Kill)

Areas of Emphasis

• Health Education

Program strategies, approaches, media

Subject Matter:

Alcohol or other drugs

HIV/AIDS

Target Groups

Students

Middle school/junior high

High school

Program Profile

Launched in July 1990, the new National Institute on Drug Abuse drug abuse and AIDS prevention campaign, cosponsored by the Advertising **Council**, Inc., **consists** of television, film, radio, and print public service **announcements** that explain the relationship among drugs, sex, and AIDS. The first phase is aimed at 12-16 year olds who may be encountering their first exposure to both drugs and sex. The aim of the campaign is to convince teenagers that the use of any drug, including alcohol, marijuana, and cocaine, can put them at risk to HIV **transmission** through risky sexual behavior.

Materials

Posters

Available from: National Clearinghouse on Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847 or call toll **free: 800/729-6686.**

For additional information, contact:

Avraham Forman Chief, Community Education Section National Institute on Drug Abuse 5600 Fishers Lane, Room 10A-39 Rockville, MD 20857 Phone: **301/443-1** 124

Drug Abuse Prevention Research Program

Areas of Emphasis

Health Education

Research on program effectiveness

Subject Matter:

Alcohol or other drugs

Target Groups

Students

Elementary

Middle school/junior high

High school

- Parents
- Out-of-School, High-Risk Youth
- . community

Program Profile

The National Institute on **Drug** Abuse **(NIDA)** drug abuse prevention research program promotes rigorous scientific study of individual and multiple component substance abuse prevention strategies focused upon schools, families, peer/friendship networks, the workplace, and local neighborhoods to determine their efficacy to prevent the onset of drug use and progression to abuse. Studies involve the use of **randomized** controlled clinical trials or well-controlled quasi-experimental research designs. A second goal of prevention research is to improve research methodology. Across all **areas** of study, special attention is given to populations at high risk of drug abuse. In general, drug prevention studies encompass a broad spectrum of specific and polydrug behaviors, such as the use of tobacco products, alcohol, marijuana, cocaine/crack, **methamphetamines**, etc. This program is authorized under Sections 301 and 515 of the Public Health Service Act (42 USC 241 and 29Occ).

The Prevention Research Branch, Division of Epidemiology and Prevention Research has a budget for FY91 of \$18 million dollars with approximately one half of these funds devoted to etiologic **research and half to** prevention intervention research. The program supports approximately 50 research grants to include specific research study grants, research centers, and research training awards.

Because of the vital importance of epidemiologic research, NIDA has expanded its National High School Senior Survey of Drug Abuse to both the eight and tenth grade. It is estimated that in 1991, approximately 16,000 **students** from each of these grades will be surveyed for the use of licit and illicit drugs.

NIDA supports controlled research of a variety of individual drug prevention programs. An assessment of this body of research through the use of **meta-analysis** techniques indicates that **school-based** drug education programs that include peer resistance training and positive peer role models are effective in reducing the use of alcohol, cigarettes, and marijuana and that alternative prevention programs appear to be effective with high-risk youth. Prevention research is supported to test the effects of preventive strategies for developing and maintaining: (1) **behavior** skills, such as self-monitoring, goal setting, self-incentives; (2) cognitive structures, such as selfefficacy and intrinsic motivation; (3) perceptions of the harmful consequences of drug use/abuse; (4) awareness of personal and social disapproval of drug use/abuse; (5) affective/emotive impulse controls; (6) heightened concentration skills; and (7) increased interpersonal shills.

The Prevention Research Branch currently funds research studies under two research program announcements. The first program announcement is titled 'School-based Prevention Intervention Research' and supports **research** to determine the efficacy of school-based drug education programs. The second program announcement is titled 'Comprehensive Prevention Research in Drug Abuse' and supports research to assess the efficacy of multiple component prevention intervention programs that focus upon the individual, family, school, workplace, and community.

Materials

- Information on research **findings** and drug prevention materials
- Copies of NIDA research announcements

Available from: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; telephone **800/729-6686** or **301/468-2600**.

For additional information, contact:

William J. Bukoski, **PhD**Acting Chief, Prevention Research Branch
Division of Epidemiology
and Prevention Research
National Institute on Drug Abuse **Rockwall** II, Suite 615
5600 Fishers Lane
Rockville, MD 20857

Programs of National Significance: Adolescent Substance Abuse Prevention Program

Areas of Emphasis

• Health Education

Information HIV/AIDS Mentoring

Subject Matter:
Alcohol or other drugs
HIV/AIDS as it relates to
alcohol and other drugs

Tobacco Life skills

Target Groups

Students

Middle school/junior high High school

• Out-of-School, High-Risk Youth

Program Profile

Implemented by the American Medical Student Association, this model will use over 700 medical student volunteers across the Nation who will interact and **train** disadvantaged youth in keeping a healthy lifestyle and will teach them alternatives to high-risk behavior which could lead to alcohol and other drug problems. The medical students serve as teachers, role models, and mentors to the youth. Youth will be found in junior and senior high schools, homeless shelters, and runaway homes.

For additional information, contact:

Ana Anders, ACSW
Special Assistant to Director
Division of Community Prevention and Training
Office for Substance Abuse Prevention
5515 Security Lane
Rockville, MD 20852

Programs of National Significance: National Head Start Association

Areas of Emphasis

•	Health	Education
Curricula		

Personnel training

Student and parent training

Subject Matter:
Alcohol or other drugs

• School and Community Health Promotion

Target Groups

- Students Preschool
- Parents
- Faculty and Staff

Program Profile

This project will help families with very young children make changes that will protect them from societal and other pressures to use alcohol and other drugs. Head Start staff, as well as parents and pre-school children, are targeted with education and training materials developed to prevent alcohol and other drug problems. The program aims to break the transgenerational cycle of drug dependency among high-risk families.

Materials

Curriculum

Available from: See program contact listed below.

For additional information, contact:

Ana Anders, ACSW
Special Assistant to Director
Division of Community Prevention and Training
Office for Substance Abuse Prevention
5515 Security Lane
Rockviie, MD 20852

Programs of National Significance: National Parent% Resource Institute for Drug Education

Areas of Emphasis

Health Education

Information

Subject Matter:

Alcohol or other drugs

Target Groups

Students

Elementary

Middle school/junior high

High school

- Parents
- Faculty and Staff

Program Profile

This project will provide the parent/school teams already involved in alcohol and other drug abuse prevention with an integrated community-based program of activities designed to supplement and enhance existing efforts to prevent alcohol and other drug abuse among children and adolescents. **This** project will target a single **school**-community complex composed of a high school, junior high, or middle school and feeder elementary schools within the community it serves.

For additional information, contact:

Ana Anders, ACSW
Special Assistant to Director
Division of Community Prevention and Training
Office for Substance Abuse Prevention
5515 Security Lane
Rockville, MD 20852

Demonstrations and Evaluation: National **Learning** Community

Areas of Emphasis

Health Education

Information

Program strategies, approaches, media

Networking

Subject Matter:

Alcohol or other drugs

Target Groups

- Faculty and Staff
- . community
- Resource Organizations Working with Youth or Related Issues

Program Profile

The Office for Substance Abuse Prevention (OSAP) National Learning Community is comprised of a network of **OSAP** grantees; researchers; foundations; policy makers; prevention advocacy groups; health practitioners; and relevant Federal, State, and local government authorities. These people work together and in their **separate** settings to quickly pass along new materials, research findings, prevention curricula, and evaluation strategies. Also, they provide support to one another in their efforts to reduce the vulnerability to substance abuse and other negative outcomes among high-risk youth and their families. The issues relating to high-risk youth are addressed in various settings, including the home and community, and in primary, middle, and high schools.

Materials

- OSAP High Risk Youth **Update** (a quarterly report that transmits new findings and concerns to The Learning Community regarding alcohol and other drugs; HIV/AIDS)
- Cultural Enhancements; Parenting; AIDS; Co-morbidity (Pamphlets)

Available from: OSAP Learning Community, P.O. Box 65061, Washington, DC 20035, 202/728-2916

For additional information, contact:

Myles J. Doherty Deputy Director Division of Demonstrations and Evaluation

Office for Substance Abuse Prevention

9th Floor/Rockwall II

5600 Fishers Lane

Rockville, MD 20857

Phone: 800/322-3825

Phone: 202/728-4033

Demonstrations and Evaluation: National Learning Community Conference

Areas of Emphasis

• Health Education Information

Personnel training

Program strategies, approaches, media

Subject Matter:
Alcohol or other drugs

• Policy Development (Federal, State, local)

Target Groups

- Faculty and Staff
- . community

Program Profile

The National Learning Community Conference stimulates and facilitates the development of networks and interest groups which focus on prevention with high-risk youth. The conference also facilitates problem solving, information sharing, and skills building between members of the Learning Community with similar interests and needs. The Fifth National Learning Community Conference was held February 10-12, 1992, Washington, DC.

Materials

Proceedings from conference

Available from: National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, MD 20847, 800/729-6686 or 301/468-2600

For additional information, contact:

Myles J. Doherty Deputy Director, Division of Demonstrations and Evaluation Office for Substance Abuse Prevention

9th Floor/Rockwall II 5600 Fishers Lane Rockville, MD 20857 Phone: 800/322-3825

Phone: 202/728-4033 Phone: 301/443-9110

High Risk Youth Demonstration Grants

Areas of Emphasis

Health Education

Curricula Information Personnel training

Program strategies, approaches, media

Subject Matter:

Comprehensive health Alcohol or other **drugs** Violence/conflict resolution

education

Tobacco Life skills Family life

HIV/AIDS

Health Services

Screening Counseling/mental health

• School as a Healthy Environment Drug free

• School and Community Health Promotion

Target Groups

Students

Elementary Middle school/junior high High school

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community

Program Profile

The Anti-Drug Abuse Act of 1986 **(P.L.** 99-570) established the Office of Substance Abuse Prevention (OSAP) within the Alcohol, Drug Abuse, and Mental Health Administration and authorized the Director of OSAP to support a demonstration grant program that funds projects that focus on substance abuse prevention among **high**-risk **youth**. Since its inception in FY87, the High-Risk Youth program has funded 263 new projects at \$60.6 million and 226 continuations at \$48.6 million for a total of \$109.2 million.

The High-Risk Youth Program **Announcement** seeks grant proposals that (1) test the feasibility of implementing previously untested innovative prevention strategies that hold great promise for expanding our repertoire of strategies **and** interventions in the prevention of alcohol and other drug abuse among high-risk youth populations; or (2) assess the program effectiveness, **replicability**, and **generalizability** of knowledge-based, established strategies for the prevention of alcohol and other drug use among high-risk youth populations, including those derived from previous OSAP experience but not system&ally evaluated.

The Anti-Drug Abuse Act defines high-risk youth as "any individual who has not attained the age of 21 years, who is at high risk of becoming, or who has **become** a drug or an alcohol abuser, and who is identified as a child of a substance abuser; is a victim of physical, sexual, or physiological abuse; has dropped out of school; has become pregnant; is economically disadvantaged; has committed a violent or delinquent act; has experienced mental health problems; has attempted suicide; has experienced long-term physical pain due to injury; or has experienced chronic failure in school." This list is not exhaustive **and** is not intended to exclude other documented high-risk groups.

Materials

• Request catalogue or directory on publications available to public. Resources are too numerous to list here. posters are also available. Video and audio **cassettes** are available for rent or loan.

Available from: National Clearinghouse for Alcohol **and** Drug Information **(NCADI),** P.O. Box 2345, Rockville, MD 20847, **800/729-6686**

For additional information, contact:

Stephen E. Gardner, DSW Chief, High Risk Youth Branch Division of Demonstrations and Evaluation **Office** for Substance Abuse Prevention 9th **Floor/Rockwall** II 5600 Fishers Lane

Phone: 800/322-3825 Phone: 202/728-4033 Phone: 301/443-9110

Rockville, MD 20857

System of State and Local Departments of Education

Areas of Emphasis

Health Education

Curricula Information **Personnel** training Policy development

Program strategies,

approaches, media

Subject Matter:

Comprehensive health HIV/AIDS education

Target Groups

Students

Elementary Middle school/junior high High school Students with special needs/special education

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community
- College Students

Program Profile

In 1987, the Division of Adolescent and School Health of the National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control (CDC) began working directly with State and local departments of education to enable them to help schools and other agencies that serve youth to implement programs to prevent HIV infection and other important health problems. Currently, CDC provides fiscal support and technical assistance to every State education agency, the District of Columbia, the Commonwealth of Puerto Rico, American Samoa, Guam, the U.S. Virgin Islands, and the 16 local education agencies that serve cities with the highest number of reported AIDS cases.

Each **funded** education agency is carrying out core program activities that include (1) developing education policies, (2) training teachers and other school **personnel**, (3) developing and disseminating materials, (4) monitoring the prevalence of student risk behaviors and the status of HIV education in its jurisdiction, and (5) evaluating the impact of its program.

Materials

State and local education agencies funded by the Division of Adolescent and School **Health** have developed **HIV**-related policies, curriculum guides, and teaching materials. These materials are described in the AIDS School Health Education Database (as discussed under Information Development and Dissemination System).

For additional information, contact:

Jack Jones
Branch Chief
Program Development and Services Branch
Division of Adolescent and School Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control
1600 Clifton Rd., Mailstop K-31
Atlanta, GA 30333

Phone: 404/488-5356

Information Development and Dissemination System

Areas of Emphasis

Health Education

Curricula Information Personnel training

Program strategies, Policy development approaches, media

Subject Matter:

education

Comprehensive health

HIV/AIDS

Target Groups

Students

Elementary Middle school/junior high High school Students with special

- Parents
- Faculty and Staff
- **Out-of-School, High-Risk Youth**

needs/special education

- . community
- **College Students**

Program Profile

Since 1987, the Division of Adolescent and School Health of the National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control (CDC) has supported the development and dissemination of state-of-the-art information that can be used to increase the effectiveness of HIV prevention education. To help disseminate HIV education information, CDC added the AIDS School Health Education Subfile to the U.S. Public Health Service's Combined Health Information Database. This subfile currently contains abstracts of more than 700 HIV education materials including HIV education policies, teacher training programs, films and filmstrips, brochures, journal articles, and reports. Each entry includes information about how to acquire the material described. New abstracts are added every three months, and they can be accessed using a computer with a modem (Contact MAXWELL ONLINE, BRS Information Technologies Division, 1200 Route 7, Latham, New York, 12110, 800/289-4277 for information regarding access.).

CDC awarded a contract for the **Education** Development Center to develop HIV prevention education materials that could be integrated within the two comprehensive school health education curricula most widely used in the United States: Growing Healthy, for elementary school students, and the Teenage Health Teaching Modules, for secondary school students.

CDC also plans and implements national and regional **conferences** for representatives of national, State, and local health and education agencies in the public and private sectors. For the past three years, the Division of Adolescent and School Health and the Society of State Directors of Health, Physical Education, and Recreation have sponsored an annual conference on school health leadership in State departments of education. This conference is convened simultaneously with a conference cosponsored by the Association of State and Territorial Directors of Public Health Education. The conference allows State **departments** of education and health to collaboratively plan efforts for improving **HIV** education within more comprehensive school health programs.

Materials

In 1987, CDC worked with representatives from many national, State, local, and Federal organizations and agencies to develop *Guidelines for Effective School Health Education to Prevent the Spread of AIDS*. The guidelines provide **recommendations** for planning HIV education programs, preparing education personnel, establishing teacher qualifications, **defining** the purpose of HIV education, determining essential content for specific grade levels, estimating curriculum time and resources, and assessing programs.

Available from: See program contact listed below.

For additional information, contact:

Margaret Cleveland
Program Assistant
Program Development and Services Branch
Division of Adolescent and School Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control
1600 Clifton Rd., Mailstop K-31

Atlanta, GA 30333 Phone: **404/488-5356**

Training and Demonstration System

Areas of Emphasis

. Health Education

Curricula Information Personnel training

Program **strategies,** Policy development approaches, media

Subject Matter:

Comprehensive health HIV/AIDS

education

Target Groups

Students

Elementary Middle school/junior high High school Students with special

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth

needs/special education

- . community
- College students

Program Profile

In 1987, the Division of Adolescent and School Health of the National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control (CDC) established three training **and** demonstration centers to help teams from State and local agencies responsible for school or comnumity-based health education implement state-of-the-art HIV prevention education for youth. Two centers focus on State-level training programs, **and** one center addresses the needs of teams from local jurisdictions.

The Michigan Department of Education and the New York Department of Education each conduct training programs that focus on activities that can be undertaken by State education agencies and other State-level organizations. They use experiences from their own programs to demonstrate **successes** and mistakea. The training sessions also address issues essential to effective HIV education, including integrating HIV education into comprehensive school health education and engaging parents and the community **in** HIV education

The training center conducted by the San Francisco Unified School District trains professionals who work with youth in cities across the Nation. A community-wide approach to HIV prevention for youth, both in and out of school, is emphasized. Cities are invited to send teams which generally include a school-district administrator, two school-district staff involved in teacher training, one school board member or parent, and two representatives from agencies or programs serving populations of youth who are potentially at high risk for HIV infection. Team building and collaboration are **stressed**.

In September 1989, CDC worked with the Education Development Center **(EDC)** to establish training centers in 13 States that would train teachers to implement comprehensive school health education that included education to prevent HIV infection. Since then, these centers have trained more than 12,000 teachers from more than 1,000 school districts. In 1990, the U.S. Senate appropriations report directed CDC to support "... a comprehensive approach to health education in the schools including AIDS, IV drug abuse, sexually **transmitted diseases**, cancer prevention, and heart health, to name a **few...[by** establishing]...30 new regional teacher training centers focused on comprehensive school health education.' CDC then established a Comprehensive School Health Education Teacher Training Center at 13 additional sites. Currently, there are 24 training centers in 23 States. CDC and EDC plan to establish a teacher training center in every State.

For additional information, contact:

Jack Jones
Branch Chief
Program Development and Services Branch
Division of Adolescent and School Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control
1600 Clifton Rd., Mailstop K-3 1
Atlanta, GA 30333

Phone: 404/488-5356

Surveillance System

Areas of Emphasis

• Health Education

Monitoring the prevalence of youth risk behaviors and school programs to prevent them

Subject Matter:

Comprehensive health

education

Violence/conflict resolution

Tobacco HIV/AIDS Alcohol or other drugs

Injuries/safety Cancer Physical fitness Cardiovascular health

Nutrition Family life

Target Groups

- Students
 High school
- Faculty and Staff

Program Profile

To identify priority health-risk behaviors, the Division of Adolescent and School Health of the National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control (CDC) examined the leading causes of mortality, morbidity, and social problems among youth and adults. Six categories of health-risk behaviors were identified: (1) behaviors that result in intentional and unintentional injuries; (2) tobacco use; (3) drug and alcohol use; (4) sexual behaviors that result in HIV infection, sexually transmitted diseases, and unintended pregnancy; (5) dietary behaviors; and (6) physical activity. In 1990, the Youth Risk Behavior Surveillance System (YRBSS) was established to monitor the incidence and prevalence of priority high-risk behaviors in each category.

In spring 1990, 35 States and 8 cities implemented YRBSS with representative samples of high school students. At the same time, CDC also implemented a national school-based survey with a nationally **representative** sample of high school students. This survey provides national data against which State and local **surveys** can be compared. In 1992, CDC plans to add a Youth Risk Behavior Supplement to the National Health Interview Survey to compare the prevalence of risk behavior among school students, drop-outs, college students, and college-age youth who do not attend college. Results from the national, State, and local **surveys** are being used to plan and evaluate comprehensive school health education programs and other interventions to reduce **these** priority health-risk behaviors among youth. National, State, **and** local data will also be used to monitor 24 of

the national health promotion and disease prevention objectives for the **year** 2000. A detailed report of the process used to develop the YRBSS priority behaviors to be **measured** in each categorical **area**, the rationale for selecting each behavior, and the results from the first year of implementation will be published.

The surveillance system has two components. **The** first is designed to regularly **measure** priority health-risk behaviors among **adolescents**.

The secondary surveillance system **assesses** the extent to which HIV education is being implemented. Each of the 71 State and local education agencies supported by CDC is encouraged to collect information regularly about the percentage of students receiving HIV education, of schools providing HIV education, and of schools providing HIV education within comprehensive school health education.

A survey to measure district requirements for HIV education and comprehensive school health education among a representative sample of the nation's 16,000 school districts was conducted by the National School Boards Associations (NSBA) during spring 1989. NSBA and the American Association of School Administrators repeated the survey with a national probability sample of school districts in the spring of 1990. These results will be published after data analysis is completed. The Council of Chief State School Officers and the National Association of State Boards of Education conduct surveys to measure State-level policies related to HIV and comprehensive school health education.

CDC provides technical assistance to State and local education agencies to help improve the quality of the data collected. Technical assistance, provided by DASH and **Westat**, Inc., includes site visits, phone consultation, specialized computer software, workshops, and survey handbooks. The handbooks contain information on obtaining clearance for survey instruments, using sampling techniques, contacting parents, administering surveys, **analyzing data**, **and using results**. **Computer programs were developed to help State and local education agencies draw probability samples** of schools and students within schools.

Materials

This information is provided in the AIDS School Health Education Database (see Information Development and Dissemination System).

For additional information, contact:

Laura Kann
Section Chief
Surveillance Research Section
Surveillance and Evaluation Research Branch
Division of Adolescent and School Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control
1600 Clifton Rd., Mailstop K-33
Atlanta, GA 30333

Phone: 404/488-5330

Evaluation System

Areas of Emphasis

Health Education
 HIV/AIDS prevention
 education program
 evaluation

Subject Matter:
Comprehensive health education

HIV/AIDS

Target Groups

- Faculty and Staff
- . School Administrators

Program Profile

The purpose of the Division of Adolescent and School Health evaluation system is to evaluate the **effectiveness** of HIV education programs and is designed to help State and local education agencies evaluate and improve the quality of their programs. In 1988, the Division of Adolescent and School Health of the National Center for Chronic Disease Prevention **and** Health Promotion, Centers for Disease Control **(CDC)** awarded a contract to 10X Assessment Associates, a private research firm in Los Angeles, to support these evaluation technical assistance activities.

Since 1988, CDC has sponsored workshops to help State and local education agencies plan evaluations of their HIV education programs. Representatives from funded agencies learn how to apply principles of behavioral epidemiology, collect process and outcome data, measure sensitive behaviors, select an appropriate evaluation design, and report results.

In 1989, CDC began **providing** additional program evaluation technical assistance to the Michigan, New York State, and San Francisco departments of education. CDC also helped the training and demonstration centers at these locations provide help to teams from other States and cities in evaluating their own programs.

In Fall 1990, CDC and 10X conducted a one-day site visit to each of 30 departments of education to discuss program goals and objectives and determine evaluation priorities. After each visit, **IOX** staff developed **an** individualized evaluation plan for each site. **Each** site is currently implementing its plan, which will result in an **annual** evaluation report.

Beginning in spring 1991, CDC began to provide continuing technical assistance to 15 State and local education agencies to help them further develop and implement plans for evaluating their HIV education programs. Technical assistance is provided through site visits and telephone consultation and may continue over **several**

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years. Specific assistance includes identification of evaluation activities to enhance **programmatic** decisions; selection and implementation of data-gathering processes; identification, modification, or generation of assessment instruments; data analysis techniques; and reporting strategies.

CDC is developing a series of evaluation materials that include evaluation guidelines and **measures to assess HIV** education policies, teacher training, curricula, and student outcomes. A training program that provides **assistance in using these materials will be** made available to all State **and funded local** education agencies after summer 1991.

10X and CDC are also developing four reports that **summarize** the literature about specific behaviors that place adolescents at risk for HIV infection; demographic, cognitive, social, and environmental determinants of such behaviors; essential elements of effective school-based HIV prevention programs; and a **proposed** protocol for evaluating such programs. **These** reports will serve as the basis for **planning** efficacy studies of school-based HIV prevention programs for the next few **years**.

Materials

This information **can** be found in the AIDS School Health Education Database (see Information Development and Dissemination System).

For additional information, contact:

Deborah **Rugg**Section Chief
Evaluation Research Section
Surveillance and Evaluation Research Branch
Division of Adolescent and School Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control
1600 Clifton Rd., **Mailstop** K-33
Atlanta, GA 30333

Phone: **404/488-533** 1

College and University System

Areas of Emphasis

• Health Education

Curricula Program strategies,

approaches, media

Subject Matter:

Comprehensive health education

Information

Policy development

Personnel training

HIV/AIDS

Target Groups

- Faculty and Staff
- College Students

Program Profile

In 1990, the Division of Adolescent and School Health of the National Center for Chronic Disease Prevention and Health Promotion, Centers for **Disease** Control (CDC) awarded a cooperative agreement to a university in each of five States among those with the highest cumulative incidence of AIDS. Each university will establish a consortium of colleges, universities, trade schools, and other agencies in the State to accomplish two primary goals. The first goal is to develop and implement education programs that could prevent the spread of HIV infection and other health problems among college students in the State. The second goal is to provide **preservice** and in-service training for school administrators and teachers to help implement effective education to prevent HIV infection and other important health problems. The five universities that received support are Illinois State University, Rutgers (the State University of New Jersey), San Diego State University, Southwest Texas State University, and the University of Central Florida. Additional support has been provided to Rutgers and San Diego State University so that each can tram teams of personnel from universities in other States who may be interested in establishing such consortia in their own States.

Materials

This information can be obtained through the AIDS School Health Education Database (see Information Development and Dissemination System).

For additional information, contact:

Jack Jones
Branch Chief
Program Development and Services Branch
Division of Adolescent and School Health
National Center for Chronic Disease Prevention and **Health** Promotion
Centers for Disease Control
1600 Clifton Rd., **Mailstop** K-31
Atlanta GA 20232

Atlanta, GA 30333 Phone: **404/488-5356**

System for Youth in High-Risk Situations

Areas of Emphasis

• Health Education

Curricula Program strategies, approaches, media Information Policy development

Personnel training Community programs

Subject Matter: HIV/AIDS

Target Groups

- Parents
- Faculty and Staff
- Out-of-Sqhool, High-Risk Youth
- . community

Program Profile

In 1991, the Division of Adolescent and School Health of the National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control (CDC) launched a new initiative to prevent HIV and other important health problems among youth who are at risk for engaging in high-risk behaviors and youth who are outside the mainstream of HIV prevention education. This initiative will help local health departments build, strengthen, and expand their capacity and that of community agencies for providing effective health education to prevent HIV infection and other relevant health problems among these youth. Reaching these youth will require the involvement and support of **many** community-based organizations. Local health departments will receive fiscal and technical assistance to support the development or expansion of community coalitions of **youth-**serving agencies. These programs will be initiated in up to three cities with the highest cumulative incidence of AIDS.

Materials

This information can be obtained through the AIDS School Health Education Database (see Information Development and Dissemination System).

For additional information, contact:

Jack Jones
Branch Chief
Program Development and Services Branch
Division of Adolescent and School Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control
1600 Clifton Rd., Mailstop K-31
Atlanta, GA 30333

Phone: 404/488-5356

Personnel training

International System

Areas of Emphasis

Health Education

Curricula

Program strategies,

approaches, media

Subject Mutter:
Comprehensive health education

Information

Policy development

HIV/AIDS

Target Groups

Students

Elementary

Students with special needs/special education

Middle school/junior high

High school

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community
- College Students

Program Profile

In 1988, the World Health Organization (WHO) in Geneva established the Division of Health Education (**HED**) as the focal point for health education in WHO and throughout the world. The Division of Adolescent and School Health of the National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control (CDC) has worked collaboratively with this new division to develop a school health education infrastructure that can support HIV prevention education in WHO and within countries. A CDC health professional is assigned to WHO in Geneva to collaborate on school health education activities. In addition, CDC has been designated as a WHO Collaborating Center on Health Education and Promotion of School-aged Children and Adolescents.

In 1990, HED organized international efforts to ensure **that the** important role of health in education and the quality of life was duly noted in **the** Declaration of the World Conference on Education for All. Efforts **are** underway in four WHO regions to **strengthen** national infrastructures for comprehensive school health education and to prepare teachers to implement comprehensive school health education curricula **that** include HIV prevention education, recommendations, and learning materials for supporting and implementing comprehensive school **health** education programs.

The collaborative WHO/CDC effort has also established international leadership for supporting these activities. Representatives from UNICEF, UNESCO, UNFPA, USAID, and other organizations will participate in two working sessions called by WHO to identify strategies for promoting and supporting school health education that is more comprehensive.

Materials

This information can be obtained through the AIDS School Health Education Database (see Information Development and Dissemination System).

For additional information, contact:

Jack Jones
Branch Chief
Program Development and Services Branch
Division of Adolescent and School Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control
1600 Clifton Rd., Mailstop K-3 1
Atlanta, GA 30333

Atlanta, GA 30333 Phone: 404/488-5356

System of National Organizations

Areas of Emphasis

Health Education

Curricula

Program strategies, approaches, media

Information Policy development

Personnel training

Subject Matter:

Comprehensive health education

HIV/AIDS

Target Groups

Students

Elementary
Student with special
needs/special education

Middle school/junior high

High school

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- community
- College Students

Program Profile

Since 1987, the Division of Adolescent and School Health of the National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control, has provided fiscal support and technical assistance to national organizations in the private sector and to the Public Health Service's Indian Health Service to enable them to help schools and other organizations that serve youth implement effective HIV education within more comprehensive school health education programs. Program activities typically include (1) conducting training sessions for constituents or target populations, (2) helping State and local agencies and other agencies that serve youth implement appropriate policies, (3) helping State and local education agencies and other agencies that serve youth implement appropriate programs, including programs for minority youth, college students, and youth in high-risk situations, and (4) developing materials. Examples of materials developed under the System of National Organizations are listed under the Materials section.

Materials

American Alliance for Heath, Physical Education, Recreation and Dance

- AIDS: What Young Adults Should Know (secondary level curriculum) (1989) (Spanish version 1991)
- Summary of the National Forum on HIV/AIDS Prevention Education for Children with Special Education Needs (1989)

American Medical Association and National Association of State Boards of Education

• Code Blue: Vnitedfor Healthier Youth (Not dated)

Council of Chief State School Officers

- Directory of School Health and Physical Education Program Staff in State Education Agencies (1990)
- Profile of State HIV/AIDS Education (1989)

Education Development Center

- Preventing AIDS: A Curriculum for Middle School and a Curriculum for Junior/Senior High School Students (1990)
- Schools Face the Challenge of AIDS: A Manual to Help Schools and Communities Develop Policies and Programs to Prevent the Spread of AIDS (199 1)

National Association of State Boards of Education

- How Schools Work and How to Work with Schools (Not dated)
- Someone at School Has AIDS: A Guide to Developing Policies for Students and School Staff Members who
 are Infected with HN (1989)

National Coalition of Advocates for Students

• Guidelines for HN and AIDS Student Support Services (1990)

National PTA

- AIDS Education and Home and School: An Activity Guide for Local PTA Leaders (Update, 1990)
- Parents, Let's Talk about AZDS (Update, 1991)

National Education Association

• Responding to HN and AIDS (Update of The Facts about AIDS: A Special Guide for NEA Members, 1989)

National Rural and Small School Consortium

• A Resource Guide to Effective HN Education in America's Rural Schools (Update 1990)

National School Boards Association

- HN Prevention Education in the Nation's Public Schools (1990)
- Reducing the Risk: A School Leader's Guide to AIDS Education (1989)

These examples and additional materials are available directly from the organizations listed above.

For additional information, contact:

Jack Jones
Chief, Program Development and Services Branch
Division of Adolescent and School Health (CDC)
1600 Clifton Rd., Mailstop K-31

Atlanta, GA 30333 Phone: **404/488-5356**

The **Performance Edge**

Areas of Emphasis

Health Education

Information Program strategies, approaches, media

Subject Matter:

Alcohol or other drugs Life skills Physical fitness

Tobacco

Health Services

Prevention activities

• School as a Healthy Environment

Drug free (alcohol and tobacco)

• School and Community Health Promotion

• Physical Ed&cation/Fitness/Sports/Recreation

Target Groups

Students

Middle school/junior high High school

• Faculty and Stuff (Athletic Coaches)

Program Profile

Section 3.(a) (40) of P.L. **98-474** requires that the Department of Health and Human Services collect, **analyze**, and disseminate (through publications, bibliographies, and otherwise) information, studies, and other data relating to the effect of cigarette smoking on human health; develop standards, criteria, and methodologies for improved information programs related to smoking and health; and undertake any other additional information and **research** activities which the Secretary determines necessary and appropriate to carry out this selection.

Each day approximately 3,000 teenagers in the United States start smoking, over 1 million annually. Smoking by young people clearly **represents** a major public **health** problem. The majority of smokers initiate smoking behavior before the age of 20.

Drinking in America begins at **increasingly** early ages. It is estimated that by the time children **are** 13 years old, 10 to 25 percent will have tried alcohol. Daily alcohol use by high school seniors has declined during the past several years, however heavy party drinking continues at alarmingly high levels.

This program message focuses on the negative effects of alcohol and tobacco use on athletic **performance**. Coaches and **other** high school personnel involved in health and safety education will be called on to deliver this message. **The** materials that have been developed are very modem in style and approach. While they convey the negative consequences of tobacco and alcohol use, the materials **stress** the desire to do your **best**, to be the best, and to have **the** "Edge."

Materials

• **The Performance** Edge is a complete educational program that takes a progressive and positive approach to explaining the effects of alcohol and tobacco on athletic **performance**. The package of **materials** is free, and it includes a video, a magazine handout for the students, and a guide for teachers and coaches.

Available from: The Performance Edge, NCADI, P.O. Box 2345, Rockville, MD 20847, 800/729-6686

For additional information, contact:

Jeff McKenna

Public Information Specialist
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control
Office on Smoking and Health

Mailstop K-SO
1600 Clifton Rd., NE

Phone: 404/488-5705 Fax: 404/488-5939

Atlanta, GA 30333

Immunization

Areas of Emphasis

- Health Education Information
- Health Services Immunizations

Target Groups

Parents

Program Profile

The Division of Immunization, National Center for Prevention Services, Centers for Disease Control provides national direction and leadership, technical assistance and consultation, national surveillance, epidemic aid, and project grant support and conducts research to assist State and local agencies in planning and implementing immunization programs. These programs, which are primarily directed to children, aim to prevent and control measles, rubella, polio, mumps, diphtheria, pertussis, and tetanus, thereby eliminating these diseases as significant public health problems. It also provides support for the purchase of Haemophilus influenzae type b vaccine for use in the public sector. In addition, the Division of Immunization provides national leadership and coordination in an initiative to improve immunization levels in adults. It also recently launched an Infant Immunization Initiative aimed at improving our Nation's capacity to deliver childhood vaccines at the appropriate age, particularly to hard to reach populations in large inner-city areas. The division provides technical assistance and collaboration to the World Health Organization's global Expanded Programme on Immunization, the Pan American Health Organization and the U.S. Agency for International Development supported program for Combatting Childhood Comnumicable Diseases.

Materials

• Parents Guide to Childhood Immunization (pamphlet)

Available from: Information Services Office, National Center for Prevention Services, E07, Centers for Disease Control, 1600 Clifton Rd., NE, Atlanta, GA 30333

For additional information, contact:

Judy M. Gantt
Training Coordinator
Division of Immunization
National Center for Prevention Services, E05
Centers for Disease Control
1600 Clifton Rd., NE
Atlanta, GA 30333

Phone: **404/639-** 1836 Fax: **404/639-1433**

Tuberculosis Control

Areas of Emphasis

- Health Education
 - Tuberculosis prevention and control
- Health Services Screening

Tuberculosis prevention and Control

Target Groups

• Medically underserved/low-income or foreign-born students, faculty, or staff

Program Profile

Following decades of steady decline, tuberculosis **(TB)** is **re-emerging** as **an** important public health problem, especially in certain geographic areas and population groups. Over 22,009 TB cases are reported each year in the United States, In addition, there are an estimated 10 to 15 million people in the United States who are infected with the TB germ, with potential to develop TB disease in the future. Students and staff at high risk include those-or their families-who were born in countries with a high prevalence of TB (primarily Asia, Africa, South America, including foreign exchange students) and/or those who are medically **underserved** and low-income. Many schools have reported TB outbreaks-involving both students and staff-that could have been prevented with adequate prevention and control measures.

In April 1989, the Department of Health and Human Services' Advisory Committee for Elimination of TB issued "A Strategic Plan for the Elimination of TB in the United States." Screening high-risk populations and providing appropriate preventive therapy were cited as crucial to achieving the nation's goal of eliminating TB by the year 2010.

The Centers for Disease Control's Division of Tuberculosis Elimination provides **consultation** and technical assistance, as well as training and education materials, to State and large city health department TB control programs regarding appropriate TB screening and prevention methods among high-risk groups.

Schools should contact their State or local health department for assistance in:

- Determining the level of risk of TB among its students and staff and the need for screening
- Planning **and** implementing TB screening as needed

- Arranging for the referral and follow up of persons found to have TB infection
 Training school health staff to carry out TB screening
- Provision of education materials to **students** and staff at high risk

Materials

- Tuberculosis—Get the Facts (English/Spanish) (general information, for persons with or at risk for TB)
- **TB Fact Sheet** (general information for health care professionals)
- Tuberculosis Skin Testing Videotape and Wallchart (for training)
- Tuberculosis Among Foreign-Born Persons Entering the United States—Morbidity and Mortality Weekly Report, December 28, 1990

Available from: See program contact listed below.

For additional information, contact:

Wan& Walton
Health Education Specialist
Centers for Disease Control
Division of Tuberculosis Elimination
Mailstop E-10

Atlanta, GA 30333 Phone: **404/639-2524** Fax: 4041639-1 450

Dental Disease Prevention

Areas of Emphasis

. Health Education

Curricula

Subject Matter:

Tobacco

Dental health

Target Groups

Students

Elementary (K-2)

Program Profile

A curriculum package was developed, pretested, and revised. The materials were designed to prevent the adoption of snuff or chewing tobacco use, and to use the peer teachers (sixth **graders**). K-2 students were targeted because, in some populations, children have begun use of snuff or chew by the later **years** of elementary school.

Materials

• Curriculum Package

Available from: Sales Desk, National Technical Information Service, 5285 Port Royal Rd., Springfield, VA 2216 1, 703/487-4650

For additional information, contact:

Linda **Crossett**Dental Health Program Specialist
Centers for Disease Control
National Center for Prevention Services
Dental Disease Prevention Activity
1600 Clifton Rd., NE **Mailstop** F-10
Atlanta, GA 30333

Phone: **404/488-445** 1

STD/HIV Prevention

Areas of Emphasis

• Health Education

Subject **Matter: HIV/AIDS**

STD

Target Groups

• Faculty and Staff

Program Profile

The Division of STD/HIV Prevention has provided technical assistance in the development of curricula for secondary school youth on prevention of sexually transmitted diseases and HIV education.

For additional information, contact:

Robert N. Kohnescher Chief, Community Education Section STD/HIV Prevention Centers for Disease Control National Center for Prevention Services 1600 Clifton Rd., NE Mailstop E-27 Freeway Park,

Atlanta, GA 30333 Phone: **404/639-** 1235 Fax: **404/639-1228**

U.S. Conference of Mayors HIV/AIDS Education Grants

Areas of Emphasis

• Health Education Information

Subject Matter: HIV/AIDS

Target Groups

- Students
 High school
- Out-of-School, High-Risk Youth

Program Profile

In cooperation with the U.S. Conference of Mayors, this program funds HIV/AIDS education activities at the community level. Examples of programs funded under this program include:

- A project targeting Latino women, youth, and substance abusers. Activities include HIV/AIDS education and training for service providers and volunteers who assist persons with AIDS.
- A project targeting out-of-school youth in emergency shelters. Activities include providing HIV/AIDS risk-reduction training to at-risk adolescents and training of staff to become HIV/AIDS prevention educators.
- A project targeting runaway and homeless youth. Activities include the development of an AIDS curriculum that will serve to provide structured learning activities for youth clients in temporary shelter.
- A project targeting homeless, runaway, and "throwaway" youth. Activities will include weekly health and HIV/AIDS education sessions and providing HIV prevention education and training to staff members.
- A project targeting gay and lesbian youth, with activities including training of peer counselors to conduct outreach and operate a gay/lesbian youth hotline and HIV prevention education for youth.
- A project targeting at-risk African-American adolescents. Activities include the development of a peer education outreach and HIV/AIDS prevention program.
- A project targeting African-American alcohol and drug abusers, gay and bisexual men, and out-of-school
 youth. Activities include the use of peer educators to conduct one-on-one intervention and counseling,
 workshops, and "home-based' presentations.

• A project targeting adolescent Haitian women between the ages of 12-20, with activities including providing peer education training and conducting field outreach.

For additional information, contact:

Stephen Schindler National Center for Prevention Services Room 1344, Freeway Park **Mailstop** E07 1600 Clifton Rd., NE **Altanta,** GA 30333 Phone: 404/639-1408

National Center for Health Statistics

Areas of Emphasis

• Health Education Information

Subject Matter:
Cardiovascular health
Tobacco

Violence/conflict resolution Dental health Injuries/safety **HIV/AIDS**

Target Groups

- Students
 High school
- Faculty and Staff

Program Profile

The National Center for Health Statistics (**NCHS**) is the principal Federal source of data used in planning health services and other programs that **meet the** health needs of the Nation. NCHS collects and **analyzes** data that address the full spectrum of concerns in the health field, including overall health status, lifestyle, and exposure to unhealthful influences; the onset and diagnosis of illness and disability; and the use of health care and rehabilitation. Examples of these activities include the National Health Interview Survey; the 1988 National Maternal and Infant Health Survey; the National Health and Nutrition Examination Survey; the National Ambulatory Medical Care Survey; the National Survey of Family Growth; the **Occupation** and Industry Mortality Program; and the Linked Birth and Infant Death Record Project.

Materials

NCHS disseminates a wide range of information materials. While many reports are statistical in nature, others contain more text and so are more useful to the general public.

Many of the NCHS surveys touch on areas which may be of interest to the users of this publication. In 1988, NCHS conducted a child health survey and several reports are available in this area. Data on the number of days children miss school as a result of illnesses and injury are available from other NCHS data sources.

• Catalog of Publications

Available from: See program contact listed below.

For additional information, contact:

Scientific and Technical Information Branch National Center for Health Statistics 6525 Belcrest Rd., Room 1064

Hyattsville, MD 20782 Phone: 301/436-6154

The Darker Side of Indoor Tanning Learning Unit

Areas of Emphasis

• Health Education

Curricula Information

Subject Matter:

Injuries/safety cancer Consumer education

Target Groups

Students

Middle school/junior high High school

Program Profile

The Darker Side of Indoor Tanning is a poster-format learning unit prepared by the Food and Drug Administration's (FDA) Center for Devices and Radiological Health to educate teenagers about the dangers of sunlamps **and** tanning parlors and to reduce injury from elective exposure to ultraviolet radiation by tanning devices.

Education about radiation hazards is authorized under the Radiation Control for Health and Safety Act.

The poster **learning** unit has been **mailed** to all U.S. high schools **and** colleges. The program has been **funded** since 1987 by FDA.

Materials

• The Darker Side of Indoor Tanning (poster) HHS Pub. No (FDA) 87-8270

Available from: FDA, HFE-88, (HFI-40 for multiple copies), Rockville, MD 20857

For additional information, contact:

Carol Vetter
Division Director
Food and Drug Administration
5600 Fishers Lane (HF2-210)
Rockville, MD 20857
Phone: 301/443-4190

Toxic Shock Syndrome Learning Unit

Areas of Emphasis

• Health Education
Curricula

Information

Subject Matter: Consumer education

Health Services

School nursing School-based health services

• physical Education/Fitness/Sports/Recreation

Target Groups

Students

Middle school/junior high

High school

students with special needs/special education

Program Profile

The Food and Drug Administration (FDA) is responsible, by law, for conducting activities to assure that medical devices such as tampons and **menstrual** pads are safe and effective. For example, FDA investigators routinely visit menstrual protection product **manufacturers** to see that these products are made, packaged, and stored in a way that insures product quality. When individuals using medical devices report problems, FDA reviews the reports to decide whether action should be taken. If a medical device poses an unreasonable risk to public health or is ineffective, FDA can have it taken off the market. FDA also develops **education programs**, like this one, to help consumers **make** informed decisions when selecting and using medical products.

The poster learning unit has been mailed to health educators, school district administrators, and school **nurses** at all public, private, and parochial junior and senior high schools in the U.S.

"Toxic Shock Syndrome" is a poster-format learning unit produced by FDA's Center for Devices and Radiological Health. Authority to disseminate this information comes from the Federal Food, Drug, and Cosmetic Act, which is enforced by FDA.

This educational program offers **all** students important information about toxic shock syndrome **(TSS)**, but it is directed primarily to those at highest **risk**: adolescent females who use **tampons** for **menstrual protection**. The format easily accompanies a health science unit on menstruation or disease **prevention**. Length of the lesson may vary from 30 minutes to one or two class sessions, depending on the activities selected. Students who complete this lesson can **learn** (1) TSS symptoms, (2) steps to take if TSS is suspected, (3) actions that may

reduce chances of **getting** TSS during tampon use, (4) sources of information about TSS, and (5) ways to become **an** informed consumer about using tampons. Students can multiply the **reach** of this lesson by sharing TSS facts with family and **friends**. &educational classes are appropriate.

Materials

• Toxic Shock Syndrome Laming Unit (includes information; poster; lesson plans) HHS Pub. No. (FDA) 85-4192

Available from: FDA, HFE-88 (HFI-40 for multiple copies), Rockville, MD 20857.

For additional information, contact:

Carol Vetter
Division Director
Food and Drug Administration
5600 Fishers Lane (HF2-210)
Rockville, MD 20857

Phone: 301/443-4190

Hazards of Anabolic Steroid Abuse: Educational Materials

Areas of Emphasis

• Health Education Information

Subject Matter:

Alcohol or other drugs

Hazards of abusing anabolic steroids

• Physical Education/Sports/Recreation

Target Groups

Students

Middle school/junior high

High school

- Coaches
- Faculty and Staff

Program Profile

The Food and Drug Administration (FDA) has produced a variety of educational materials on the **hazards** of youngsters abusing anabolic steroids for purposes of weight gain, strength-building and improved athletic **performance**.

Authority to educate the public on **the** dangers of abusing prescription drugs such as steroids comes from section **903** of the Federal Food, Drug, and Cosmetic Act.

Materials

Both posters and brochures are available free

Available from: FDA HFD-8, 5600 Fishers Lane, Rockville, MD 20857

For additional information, contact:

William Rados

Director of Communications Food and Drug Administration **HFI-40**

5600 Fishers Lane Rockville, MD 20857 Phone: **301/443-3220**

Fax: 301/443-9057

Health Fraud Teacher's Kit

Areas of Emphasis

• Health Education

Information

Subject Matter:

Nutrition

Consumer education

Target Groups

Students

High school

Program Profile

The Health Fraud Teacher's Kit was prepared by the Food and Drug Administration (FDA) **to** teach high school students how to **recognize** and avoid health fiaud. The kit contains **5** lessons complete with text, classroom activities, tests, and **supplemental** materials, including reprints from FDA Consumer magazine. More than 12,000 kits have been distributed since August 1989. The kit, like almost all FDA public information activities, is authorized under section 903 of the Federal Food, Drug, and Cosmetic Act.

Materials

• Copies of **the** kit are available (free)

Available from: Health Fraud Kit, **HFI-44**, Food and Drug Administration, 5600 **Fishers** Lane, Rockviie, MD 20857

For additional information, contact:

William M. Rados

Director of Communications Food and Drug Administration

HFI-40

5600 Fishers Lane Rockville, **MD** 20857

Phone: 301/443-3220 Fax: 301/443-9057

Retail Food Protection

Areas of Emphasis

• Health Education

Personnel training (for food managers and inspectional personnel)

Program strategies, approaches, media

Subject Matter:

Food safety

• School as a Healthy Environment Food safety

@Healthy School Food Services

Target Groups

• Cafeteria/Food Service Management

Program Profile

The Retail Food Protection Program, administered by the Food and Drug Administration (FDA), is a cooperative Federal-State effort concerned with the safety of food at the retail level. The program covers the food services (including school food service), food vending, and food store industries.

More than 85 State and territorial and 2,700 local regulatory agencies assume primary responsibility for monitoring retail food operations and assuring that industry is adequately protecting the consumer in the marketplace. FDA assists and supports these regulatory agencies by coordinating development of uniform standards, providing **technical assistance** and interpretation, acting as a focal point for information exchange, developing training aids, providing training, and, upon request, evaluating State programs.

FDA's Center for Food Safety and Applied Nutrition works with the Head Start Bureau to help assure that **feeding** programs in the Head Start centers conform with Federal food safety and sanitation recommendations.

Materials

• Food Protection and Sanitation Information and Materials

Available from: Center for Food Safety and Applied Nutrition, Retail Food Protection Branch, HFF-342,200

C St., SW, Washington, DC 20204

For additional information, contact:

Arthur L. Banks

Director Retail **Food** Protection Branch Food and Drug Administration HFF-342 200 c St., SW Washington, DC 20204

Phone: 202/485-0140 Fax: 202/245-7160

DHHS/Health Resources and Services Administration Maternal and Child Health Bureau

Child and Adolescent **Health** Branch.

Areas of Emphasis

- Health Education
- Health Services
- School as a Healthy Environment
- Nutrition/Healthy School Food Services
- School and Community Health Promotion
- Physical Education/Fitness/Sports/Recreation

Target Groups

- Students
- Parents
- Faculty and Staff
- Health Professionals
- Community Youth Service Workers
- Minority Children, Youth, and Families

Program Profile

The Maternal and Child Health Bureau (**MCHB**) provides funding and other assistance in support of improving the health of America's children and youth. The legislative authority for programs of the bureau is Title V of the Social Security Act, passed in 1935, which has provided ongoing funding for child health services as part of health programs for mothers and children, administered today as the Maternal and Child Health Services Block Grant. Eighty-five percent of the appropriation is allocated to State health agencies to assist them in promoting, improving, and delivering maternal and child health care services and 15 percent is set aside for the Federal Maternal and Child Health Bureau to award on a competitive basis to special projects of regional and national significance (SPRANS).

Over 70 diverse SPRANS focus on adolescent health, which includes adolescents as an integrated component. A number of these projects target their activities toward children in school settings. Projects in research, interdisciplinary training, and demonstration grants contribute to the advancement of the knowledge base in adolescent health, facilitate leadership development in the field, and continue professional education.

State MCH programs use their Title V funds to address the health of children in their States in a variety of ways including support for school health services and programs. MCHB has, for the past four years, convened State representatives to provide greater opportunity for program interaction and technical assistance. Resources have been made available to assist States with continuing education for local providers; data needs assessment and program development; and promoting the health of children and youth through local partnership and comprehensive, community-based approaches.

Selected examples of SPRANS grants which relate to school health:

- Youth Enrichment Support Services in a School Setting,' seeks to reduce high-risk behavior in an urban high school population by providing case management services to students to link students to services which will assist them in curbing or eliminating high-risk behaviors and monitoring the use of services and attainment of established behavioral goals.
- Better Health for Rural Teens" attempts to establish lifelong health practices by providing education and skills to promote positive health, improve the ability of the health system to meet the health needs of adolescents; and use an integrated, multiservice community approach to improve the health status of adolescents. This project includes health screening; school-based clinics for prevention and treatment; incorporation of comprehensive health education into the school curriculum; and after-school teen programs.
- "Nutrition Information for Coaches and Athletes' attempts to improve the nutrition knowledge, attitudes, and practices of high school coaches and establishes a network of nutrition resources for the coaches' use.
- "Options for Pre-Teens" is a primary prevention program for at-risk fifth, sixth, and seventh grade boys and girls. It incorporates a life-planning curriculum, academic skills improvement, a community volunteer program, school climate enhancement, parent involvement, and case management to provide individual attention and early intervention, family counseling, and networking to social and health services.

Materials

- Adolescent Health, Abstracts of Active Projects
- Adolescent Health, Catalog of Products From Projects Supported by the Office of Maternal and Child Health, 1990

Available from: National Maternal and Child Health Clearinghouse, 38th & R Sts., NW, Washington, DC 20057

For additional information, contact:

JoAnn Gephart
Maternal and Child Health Bureau
Health Resources and Services Administration
Public Health Service
5600 Fishers Lane, Room 9-05
Rockville, Md 20857

Phone: 301/443-2170

DHHS/Health Resources and Services Administration Maternal and Child Health Bureau

Injury **Prevention** Program

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Subject Matter:

Violence/conflict resolution Injuries/safety

• School as a Healthy Environment Safety

Target Groups

Students

Elementary Middle school/junior high High school

Parents

Faculty and staff

Program Profile

The Maternal and Child Health Bureau injury prevention program focuses on both intentional and **unintentional** injury. Past grants have addressed prevention of injury in sports (school), playground safety, pedestrian safety, violence **deescalation.** These **grants** were supported through the Title V "Special Projects of Regional and National Significance" program. There are six grants currently funded by the injury prevention program.

Materials

• Pedestrian Safety Curriculum for Ages 6-9

Available from: Dr. Fred Rivara, Phone: 206/223-3408

For additional information, contact:

Jean **Athey**Maternal and Child Health Bureau
Room 9-31
5600 Fishers Lane
Rocleville, MD 20857

Phone: 301/443-4026

Early Childhood Health Branch

Areas of Emphasis

Health Education

Curricula

Information

Personnel training

Program **strategies**, approaches, media

Subject Matter:

Comprehensive health

Injuries/safety

Environment

HIV/AIDS

education Nutrition

Physical fitness

Dental health

Mental health

• Health Services

Immunizations Health services Screening

Counseling/mental health

• School as a Healthy Environment

Safety

Drinking water lead

Environmental lead

- Nutrition Services
- Physical Education/Fitness/Sports/Recreation
- School and Community Health Promotion

Target Groups

• Students

Preschool

- Parents
- Faculty and Staff

Program Profile

An interagency agreement between the Head Start Bureau of the Administration for Children, Youth, and Families and the Matemal and Child Health Bureau of the Health Resources and Services Administration

represents the collaboration of two Federal programs working together to support the health, safety, and the development of social **competence** of children participating in the Head Start Program.

Through the Maternal and Child Health Bureau, the Public Health Service (**PHS**) has provided training and technical assistance for Head Start medical, dental, nutrition, and mental health **services**, including the development of **a PHS/Head** Start Training **and** Technical Assistance Network consisting of over 1,100 State **and** local medical, dental, nutrition, and mental health consultants and provides a strong link **between** Head **Start** and State and local public health agencies.

Materials

- Head Start Nutrition Education Curriculum
- Head Start Parents Guide to Nutrition Education
- Head Start Dental Curriculum
- Head Start Mental Health Coordinators Curriculum
- Head Start Mental Health: It's Everybody's Business (brochure)
- Mental Health in Head Start: It's Everybody's Business (video)

Available from: Head Start Bureau, AC4F, DHHS, P.O. Box 1182, Washington, DC 20013

For additional information, contact:

Phyllis E. Stubbs, MD Chief, Early Childhood Health Branch Maternal and Child Health Bureau **Parklawn** Building, Room 9-20 Rockville, MD 20857

Phone: 301/443-6600

Improvement Projects for Children with Special Health Needs

Areas of Emphasis

• Health Education

Information Personnel training Program strategies,

approaches, media

Subject Matter:

Cardiovascular healthInjuries/safetyEnvironmentNutritionDental healthLife skillsFamily lifePhysical fitnessMental health

• Health Services

Counseling/mental health School-based health services Feasibility study of school

enrollment-based health insurance

• Nutrition/Healthy School Food Services

• Collaborative Partnership Between Health and Education Policy Makers Throughout School Years for Children with Special Health Needs

Target Groups

Students

Students with special needs/special education

- Parents
- Faculty and Staff
- community
- Health and Education Finance Personnel and Policy Makers

Program Profile

Improvement projects for children with special health needs promote collaborative partnerships between health and education program managers for children with special health care needs.

This activity is authorized by Title V of the Social Security Act, as amended by OBRA-89. There is a 15 percent set-aside of the **Maternal** and Child Health Block Grant for demonstration Special Projects of Regional and National Significance.

In FY91, the program funded 62 projects at a total of 12.1 million dollars. The **funds** were distributed in the following proportion:

24%—Family-centered support
19%-National Resource Centers
17%—Chronic Illness
14 %-State Staff Development
13 %-Early Intervention
13 %-Systems Development

An FY92 competition is anticipated to **fund** 20 more State staff development projects.

Materials

The Maternal and Child Health Bureau publishes or funds a wide range of materials relevant to children with special health needs.

Available from: National Center Education in Maternal and Child Health, Georgetown University, 38th and R Sts., NW, Washington, DC 20057, Phone: 202/625-8410

For additional information, contact:

John Shwab
Chief, Habilitative Services Branch
Division of Services for Children Special Health Needs
5600 Fishers Lane
Rockville, MD 20857

Phone: 301/443-2370

State Services for Children with Special Health Care Needs

Areas of Emphasis

Health Education

Curricula Information Personnel training

Program strategies, approaches, media

Subject Matter:

Cardiovascular health Injuries/safety Nutrition
Dental health Life skills Family life

HIV/AIDS Physical fitness

• Health Services

School musing Screening Counseling/mental health

School-based health services

• Nutrition/Healthy School Food Services

• School and Community Health Promotion

Target Groups

Students

Students with special needs/special education

- Parents
- Faculty and Staff
- . community

Program Profile

Title V of the Social Security Act, as amended by the Omnibus Reconciliation Act of 1989, directs that States must use at least 30 percent of their Maternal and Child Health Block Grant funds for family-centered, community-based, culturally competent, coordinated care for children with special health care needs and their families. State Maternal and Child Health agencies must coordinate their activities related to children with special health needs with related education programs, such as the coordination of school health services and special education under P.L. 99-457.

For additional information, contact:

John Shwab Chief, Habilitative Services Branch Division of Services for Children with Special Health Needs Maternal and Child Health Bureau, Room 11A-30 5600 Fishers Lane Rockville, MD 20857

Phone: 301/443-2370

Health Education, Counseling, Peer Support, and other Genetic Services

Areas of Emphasis

• Health Education

School curricula for high. school students

Peer support

Nurse, parent, and teacher education

Target Groups

Students

High school

Parents

Faculty and Staff

School and public health nurses

Teachers

counselors

Program Profile

The Maternal and Child Health Bureau directly supports a program of "Special Projects of Regional and National Significance." Funding for the program is provided through the Maternal and Child Health Federal set-aside program, authorized under Section 6502(a) of the Social Security Act. The regulation, implementing the Federal set-aside program, applies to genetic disease testing, counseling, and information projects, as well as other programs for Maternal and Child Health or Children with Special Health Care Needs, research and training projects, and hemophilia diagnostic and treatment centers.

The purpose of the program is to educate children, parents, educators, and providers about the etiology of genetic disorders, to increase the awareness of medical and psychosocial complications, and to assist in adjusting to the consequence of such disorders.

For the last three years funding for the Genetic Services Branch has averaged approximately \$7.6 million. In addition to supporting grants for education, training, and counseling, support has also been provided to projects offering testing and followup services, improving access to service(s), and developing and expanding regional and national networks.

Materials

• The Maternal and Child Health Clearinghouse serves as the major dissemination and repository point for materials developed by projects supported by grants from this program. Some materials however, may be obtained directly from the projects.

Available from: See program contact listed below.

For additional information, contact:

Jane S. Lin-Fu, MD Maternal and Child Health Bureau Health Resources and Services Administration Public Health Service 5600 Fishers Lane, Room 9-05 Rockville, MD 20857

Phone: 301/443-2170

Hemophilia and Pediatric AIDS Programs

Areas of Emphasis

• Health Education

Information

Program strategies, approaches, media

Subject Matter:

HIV/AIDS

Hemophilia

• Health Services

School nursing

Comprehensive care systems for hemophilia and pediatric AIDS

School as a Healthy Environment

AIDS services

• School and Community Health Promotion

Target Groups

- Faculty and Staff
- Out-of-School, High-Risk Youth

Program Profile

The Hemophilia and Pediatric AIDS Branch of the Maternal and Child Health Bureau is concerned with the development of comprehensive care systems for children with hemophilia and pediatric HIV infection. Schools can be an important component of such systems of care.

With **funding** from the Maternal and Child Health Bureau, a School Program Presentation **Guide** has been developed. The purpose of this guide is to provide information to school **personnel** on hemophilia. The guide was designed for hemophilia treatment center nurses, as a teaching aid to assist them with school presentations, and consists of the following items:

- A presentation guide
- Set of 39 slides
- Twenty-five copies of a pamphlet, The Child With Hemophilia, First Aid in School
- Evaluation forms

Developmental disability as a result of pediatric HIV infection is so widespread that in the next several years HIV infection will likely become the primary infectious cause of developmental disabilities. School attendance plays a critical role in a child's well being. Children who are HIV infected but not in need of special education services are entitled to the same public education as other children. Children who are disabled as a result of HIV infection are entitled to special educational services and an Individualized Educational Plan designed to meet their particular learning needs. Such support may include special instruction; physical, occupational, and speech and language therapy; and other related services **necessary** for the child to benefit from special education.

The Maternal and Child Health Bureau provides support for the National Pediatric HIV Resource Center, which has produced a resource list for school nurses on "Schools, School Health, HIV/AIDS." The National Pediatric HIV Resource Center **can** be contacted at The New Jersey Medical School of the University of Medicine and Dentistry of New Jersey, Department of Pediatrics, 185 S. Orange Ave., Newark, NJ 07103, phone 201/268-8273.

Materials

- School Program Presentation Guide
- The Child With Hemophilia, First Aid In School (pamphlet)
- The Child With Hemophilia, A Resource For the Educator (pamphlet)

Phone: 301/443-9051

Available from: HAND1 ("Hemophilia and AIDS Network For the Dissemination of Information"-The National Hemophilia Foundation), Phone: 1-800/42-HANDI, or 212/431-8541.

For additional information, contact:

Beth D. Roy Chief, Hemophilia and AIDS Program Branch Division of Services for Children With Special Health Needs Maternal and Child Health Bureau, Room 9A-34 5600 Fishers Lane Rockville, MD 20857

Advanced Nursing Education Grant Program

Areas of Emphasis

Health Education
 Personnel training

Subject Matter: Nursing education

• Health Services School nursing

Target Groups

. School Nurses

Program Profile

The mission of this program is to provide Federal support for graduate education programs in Schools of Nursing. Although there is not a specific mandate for Master's & Doctoral programs in school health, many programs in Community Health Nursing include content and practice in school health.

Grants for Advanced Nurse Education are presently authorized under section 821 (a), title VIII, of the **Public** Health Service **(PHS)** Act, as amended by Public Law 100407.

In **1990, 10** graduate program to **prepare** nurses in Community Health Nursing were funded for a total of **\$1,551,759.**

Applications for grant awards are accepted for review twice a year. In 1990, there were 82 program **grants** awarded. **Current** priorities include programs targeted to care of persons with AIDS, gerontology, minorities, **and** underserved populations.

For additional information, contact:

Thomas P. Phillips, **PhD**, RN, FAAN Chief, Advanced Nursing Education Branch Division of Nursing Bureau of Health Professions 5600 Fishers Lane, Room **5C-26 Rockville**, **MD 20857**

Phone: 301/443-6333

Nurse Practitioner and Nurse-Midwifery Grant Program

Areas of Emphasis

• Health Services School Nursing

Target Groups

. School Nurses

Program Profile

The Nursing Shortage Reduction and Education Extension Act of 1988 (Public Law 100607) extends and amends the nursing education authorities for the Nurse Practitioner and Nurse-Midwifery Program, under the Nurse Training Act of 1975, (Public Law **94-63)**, Section 822, Title VIE.

This Nurse Practitioner and Nurse-Midwifery Grant Program provides Federal support to schools of **nursing** and other entities that offer master's degree or certificate programs in Pediatric Nurse Practitioner (**PNP**), School Nurse Practitioner (SNP) and perinatal programs. Currently, 14 such **PNP/SNP** programs are supported, of which 9 work directly with schools and/or education departments to contract for student nurse **pracitioner** experiences. Many graduates of these programs work in areas (schools, health departments, etc.) that provide health education, primary care, health promotion, and **disease** prevention programs. Information can be obtained from individual Nurse Practitioner education programs.

The Nurse Practitioner and Nurse-Midwifery Grant Program has provided support to about 50 percent of nurse practitioner and nurse-midwifery programs in the United States. This support has enabled educational programs to graduate over 10,008 **nurse** practitioners and nurse-midwives who then are eligible to take national certification examinations to practice.

In **1990, 62** educational programs were awarded grants, for a total of 92 specialty programs: Family, Adult, Pediatric, Gerontological, **OB/GYN**, Women's Health, School Health, and Occupational Health nurse practitioner programs, and Nurse-Midwifery programs.

Current priorities relate to the Secretary's target areas of access to health care, especially for minority and disadvantaged groups, and increasing minority enrollment in health professions schools. The results to be accomplished are lower infant and adult mortality rates, lower morbidity rates, **particulary** with respect to **drug** and alcohol use/abuse, tobacco use, HIV/AIDS, and other disease and lifestyle entities.

For additional information, contact:

Thomas P. Phillips, **PhD**, RN, FAAN Chief, Advanced Nursing Education Branch Division of Nursing Bureau of Health Professions 5600 Fishers Lane, Room **5C-26 Rockville**, MD 20857

Phone: 301/443-6333

Division of Nursing Special Projects Grants

Areas of Emphasis

- Health Education
 Personnel training (school nurse continuing education for approved grant applicants)
- Health Services School nursing

Target Groups

. School Nurses

Program Profile

Special Project Grants and Contracts are authorized under Title VIII Section 820 of the Public Health Service Act to improve musing practice through projects that increase the knowledge and skills of nursing personnel, enhance their effectiveness in care delivery, and reduce vacancies and turnover in professional nursing positions. Grauts and contracts authorized under Title VIII, Section 827 of the Public Health Service Act to increase opportunities for individuals from disadvantaged backgrounds to pursue a nursing education.

For additional information, contact:

Dr. Mary S. Hill
Chief, Nursing Education Practice Resources Branch
Division of Nursing
Bureau of Health Professions
5700 Fishers Lane, Room **5C-14**Rocleville, MD 20857

Phone: 301/443-6193

Community and Migrant Health Centers: School-Based Programs

Areas of Emphasis

Health Education

Curricula Information Personnel training

Program strategies, approaches, media

Subject Matter:

Comprehensive health Alcohol or other drugs Cardiovascular health

education

Violence/conflict resolutionInjuries/safetyEnvironmentNutritionTobaccoCancerDental healthLife skillsFamily lifeHIV/AIDSPhysical fitness

• Health Services

Immunizations School nursing Screening

Counseling/mental health School-based health services

Nutrition/Healthy School Food Services

• Physical Education/Fitness/Sports/Recreation

• Worksite Health Promotion for Faculty and Staff

School and Community Health Promotion

Target Groups

Students

Preschool Elementary Middle school/junior high

Students with special needs/special education

• Parents

Faculty and Staff

High school

• Out-of-School, High-Risk Youth

. Community

Program Profile

The Community and Migrant Health Center Program provides primary care health services to medically underserved communities. Of the 550 community and migrant health centers, there are many which have school-based programs and provide various health services to the students, faculty, and community. Due to the variability in community and migrant health centers, each school-based program offers various services.

For additional information, contact:

Richard C. Bohrer Director, Division of Primary Care Services Bureau of Health Care Delivery and Assistance 5600 Fishers Lane, Room **7A55** Rockville, MD 20857 Phone: **301/443-2260**

DHHS/Health Resources and Services Administration Bureau of Health Care **Delivery** and Assistance

Outreach and Primary Health Services for Homeless Children

Areas of Emphasis

- Outreach
- Comprehensive Primary Care
- Referral

Target Groups

- Homeless children through age 19
- Children at risk of homelessness
- Homeless and at-risk families

Program Profile

The Outreach and Primary Health Services for Homeless Children program is a demonstration program to provide for the delivery of comprehensive primary health services to homeless children and to children at imminent risk of homelessness. Under the program, the following services must be provided, either directly or through contract:

- outreach services to identify children who are homeless or at imminent risk of homelessness and to inform parents/guardians of the availability of services
- comprehensive primary health services, including the services of physicians, nurses, nurse practitioners, and physician assistants; diagnostic laboratory and radiology services; preventive health services; and pharmaceutical services
- referrals for provision of health services, social services, and education services, including referral to
 hospitals, community and migrant health centers, Head Start and other educational programs, and programs
 for prevention and treatment of child abuse.

Materials

- . Fact Sheet
- Federal Register Announcement
- Program Guidance
- Directory of Program Participants
- Quarterly Newsletter

Available from: See program contact listed below.

For additional information, contact:

James L. Gray
Chief, Health Care for the Homeless Branch
Division of Special Populations Program Development
Bureau of Health Care Delivery and Assistance
Health Resources and Services Administration
5600 Fishers Lane, Room 7-A-22

Rockville, Maryland 20857 Phone: **301/443-2512**

Ready to Learn School Health Program

Areas of Emphasis

- Health Education
- Health Services

School-based or school-linked comprehensive primary and preventive health care linkage with related social services

• School Health Promotion

Target Groups

Students

Preschool

Elementary

Program Profile

The President's FY93 budget includes a proposal for the Ready to Learn School Health Program. Pending Congressional appropriation, this program will:

- Link schools to community and migrant health centers, health care for the homeless programs, primary care for residents of public housing programs, and other Federally qualified health centers to provide comprehensive primary health care and prevention services to children ages 3-12 and their families.
- Target children and families at risk for health-related conditions that diversely affect school performance in communities where underutilization and lack of access to primary care and preventive services contribute to school failure.
- Promote a "Habit of Health" among children to encourage responsibility and interest in their own personal health.
- Target communities that have high incidence of poverty, lack of access to primary care, high proportion of racial/ethnic minorities, and poor health status indicators.

Services will be defined by each school and include either the provision of, or referral agreements for, primary and preventive health care, including health education and related social and support services.

Materials

- Fact Sheet
- Program Guidance
- Technical Assistance Documents
- Compendium of Existing Programs

Available from: See program contact listed below.

For additional information, contact:

Corinne Axelrod, MPH
Bureau of Health Care Delivery and Assistance
Health Resources and Services Administration
5600 Fishers Lane, Room 7-34
Rockville, MD 20854
Phone: 301/443-1034

152—Healthy Schools

Indian Health Service Health Education

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Program strategies, Technical assistance and approaches, media consultation

Subject Matter:

Comprehensive health Alcohol or other drugs Cardiovascular health

education
Injuries/safety Tobacco Cancer

Dental health

Life skills

Family life

HIV/AIDS

Physical fitness

Consumer education

Indian culture, spirituality

Health Services

Immunizations screening Counseling/mental health

School-based health services Clinic and community

• Physical Education/Fitness/Sports/Recreation

- Worksite Health Promotion for Faculty and Staff
- School and Community Health Promotion
- Health Career Recruitment

Target Groups

Students

Preschool Elementary Middle school/junior high

High school

Parents

• Out-of-School, High-risk youth

community

Program Profile

The Indian Health Service (IHS) health education program provides technical assistance and consultation to tribes and schools in the planning and implementation of school health education activities. Examples of such activities include: B.A.B.E.S.-Beginning Alcohol Addiction Basic Education Studies-(alcohol and substance abuse), family planning, inhalant abuse, physical activity and fitness, safety, HIV prevention, health promotion and disease prevention, parent/consumer education, health careers recruitment, and presentations to school boards. The IHS health education program also works with the Head Start program.

Materials

• Indian-specific health education materials are numerous.

Available from: See program contact listed below.

For additional information, contact:

Donna Leno, MPH Chief, Health Education Indian Health Service **Parklawn** Building, Room **6A-20** 5600 Fishers Lane Rockville, MD 20857 Phone: **301/443-1870**

Fax: 301/443-8336

curriculum

Indian Health Service National School Health Education Program

Areas of Emphasis

Health Education

Curricula Information Personnel training Subject **Matter:** Comprehensive health Alcohol or other drugs Cardiovascular health education Violence/conflict resolution Injuries/safety Environment Nutrition Tobacco cancer Dental health Life shills Family life HIV/AIDS Physical fitness cultural adaptations of

- School as a Healthy Environment Safety
- Physical Education/Fitness/Sports/Recreation
- School and Community Health Promotion

Target Groups

Students

Elementary Middle school/junior high High school

Program Profile

The Indian Health Service **(IHS)** and the Centers for Disease Control have a cooperative agreement to develop a national strategy for HIV prevention education in Indian/Alaskan Native schools. The program **utilizes** a comprehensive school health education approach using a curriculum that has been adapted by the South Dakota State Department of Education to be culturally specific for the Plains Indian people. Other areas are using this template to adapt to their specific regions, i.e., Alaska, Southwest, etc. Currently, the areas served **are** Alaskan, Albuquerque-area, and Phoenix-area Native American Schools. IHS plans to expand to include all areas in the coming years. The schools utilize services from the health educators from II-IS or tribal health educators to provide health fairs, assemblies, workshops, and training on a variety of topics for students in grades K-12.

For additional information, contact:

Georgeline Sparks Coordinator Room **6A-20, Parklawn** Building 5600 Fishers Lane **Rockville,** MD 20857 Phone: **301/443-1870**

Maternal and Child Health Program

Areas of Emphasis

• Health Services
Counseling/mental health
Immunizations

School musing School-based health services **Screening**

Program **Profile**

The Indian Health Service (II-IS) is a comprehensive health care system. Thus, the resources are not categorized by age group. Adolescents are provided services within the system.

Although IHS has a central administration in Washington, the direction and development of programs are primarily the responsibility of the 12 IHS Area Offices. Specific programs in each area are unique.

For additional information, contact:

George Brenneman, MD
Jerry Lyle, MD
Indian Health Service
Office of Health Programs
Division of Clinical and Preventive Services
Maternal and Child Health Branch
5600 Fishers Lane, Room 6A-38
Roclwille, MD 20857

Phone: 301/443-1948 Fax: 301/443-8336

Environmental Health/Injury Prevention

Areas of Emphasis

• Health Education Information

Program strategies, approaches, media

Subject Matter: Injuries/safety

 School as a Healthy Environment Safety

Target Groups

• Students Elementary

High school

• community

Program Profile

The authority for conducting this program is covered under general authority of the Indian Health Service (IHS) to conduct programs to improve the health status of Indian people.

The purpose is to reduce severe injuries and deaths among American Indians and Alaska Natives.

To date, there has been no direct line funding for Injury Prevention Program activities but these activities have been accomplished under the Sanitation Program funds.

Accomplishments of this program include: (1) raising awareness of injuries as a major health problem; (2) providing extensive training for **IHS** and tribal health personnel in injury epidemiology and development of prevention programs; and (3) conducting very successful prevention projects (reducing severe injuries among the target population).

Activities of the program include: (1) Annual Injury Prevention Campaign; (2) special studies on severe injuries; and (3) development of tribal health department capacities to address the problem of injury prevention.

Upcoming activities include continuation of current activities with quality improvement.

Materials

• Guide To Action, for Annual Injury Prevention Campaign

Available from: See program contact listed below.

For additional information, contact:

Richard J. Smith Injury Prevention Program Manager Indian Health Service 5600 Fishers Lane, Room **5A-39** Rockville, MD 20857

Phone: 301/443-1054 Fax: 301/443-5697

Nutrition **Program**

Areas of Emphasis

• Nutrition/Healthy School Food Services

Target Groups

• Students Elementary

Middle school/junior high

High school

• Faculty and Staff

Program Profile

The Nutrition Program works with the Bureau of Indian Affairs (BIA) to provide training to food service employees in BIA schools.

For additional information, contact:

Joanne Proulx, **MEd**, RD Chief, Nutrition and Dietetics Training Program Indian Health Service P.O. Box 5558 Santa Fe, NM 87502

Phone: 505/988-6470

Dental Disease Prevention and Health Promotion

Areas of Emphasis

Health Education

Information **Personnel** training

Subject Matter:

Tobacco Dental health

. Health Services

screening Dental sealant programs

• School and Community Health Promotion

Target Groups

Students

Preschool Elementary Middle school/junior high High school

- Parents
- Faculty and Staff
- . community

Program Profile

The Indian Health Service **(IHS)** has placed a high priority on enhancing efforts in community and school water fluoridation and other measures to prevent dental caries. In 1990, almost 4,000 Indian children **received** supplemental fluoride tablets or drops and over 70,090 children were participating in fluoride mouth-rinse programs. Clinically based dental caries prevention efforts have demonstrated a 450 percent increase in the use of dental sealants since 1984. There are also many on-going tobacco education/intervention projects.

The **IHS** dental program works with tribally run Head Start grantees and public schools demonstrating high Indian student populations. Screenings, parental and student educational programs, and some school-based sealant projects are currently employed intervention strategies. Where applicable, fluoride rinse and tablet programs are in place.

For additional information, contact:

R. Frank Martin Assistant Chief, Dental Services Branch Indian Health Service Headquarters Parklawn Building, Room 6A-30 5600 Fishers Lane Rockville, MD 20853

Phone: 301/443-1 106

Smoking Prevention Trials in Schools

Areas of Emphasis

• Health Education

Subject Matter: Tobacco

Target Groups

• Students
Elementary

Middle school/junior high

High school

Program Profile

In 1983, the National Cancer Institute (**NCI**) designated the Smoking, Tobacco, and Cancer Program (STCP) to **serve** as the focal point for the institute's research, disease prevention, and health promotion activities related to tobacco use and cancer. The program's goal is to employ cancer control research principles to decrease the incidence of cancer caused by, or related to, smoking and the use of tobacco producta. This and **NCI's** smoking-related Year 2000 goal-reduction of the cancer mortality rate by up to 50 percent are **being addressed** through a program of controlled intervention trials and defined population studies based on sound biomedical and behavioral research **findings.** The intent of the trials is to develop cost-effective, durable, **generalizable**, and readily adoptable interventions that will aid specific target populations to either stop, or not start, smoking.

Funding for the trials began in 1984, and since then, STCP has supported 49 intervention trials in eight major areas: adolescent smoking prevention; self-help smoking cessation strategies; utilizations of physicians and dentists as interveners; mass media approaches; prevention and cessation of smoking among women, black, and Hispanic populations; and prevention and cessation of smokeless tobacco use.

A major portion of this research activity has been aimed at preventing smoking among adolescents. Fifteen NCI-funded, school-based smoking prevention trials, involving more the 200,000 youth, have been funded since 1984. Of these trials, eight are developing new curricula or techniques for smoking prevention; three are adapting existing curricula for smoking prevention to more current approaches or special populations; and two are conducting long-term follow-up of youth who were exposed to smoking prevention programs in schools as long as 10 years ago.

To date, few of **these** trials have been completed. Given the magnitude of the public health problem, however, **NCI** sought to find what could be recommended now, particularly to schools, that would help **reduce** smoking among youth. In order to do this, **NCI** convened an expert advisory panel to address the question, "What are the essential elements of a school-based smoking prevention program?"

Materials

School Programs to Prevent Smoking: The National Cancer Institute Guide to Strategies That Succeed.
 This guide to school-based smoking prevention programs for educators is the product of five years of work to prevent cancer.

Available from: Office of Cancer Communications, National Cancer Institute, Building 31, 9000 Rockville Pike, Bethesda, MD 20892

For additional information, contact:

Tom Glynn, **PhD**Chief, Cancer Prevention and Control Research Branch
National Cancer Institute
National Institutes of Health
9000 Rockville Pike
Bethesda, MD 20892

Phone: 301/496-8520

Activities of the Health Education Section

Areas of Emphasis

Health Education

Research

Subject **Matter:**

Alcohol cancer Small business applications

of new technologies

Nutrition HIV/AIDS Tobacco

Diffusion of innovations

- School and Community Health Promotion
- Diffusion of Effective School Health Strategies

Target Groups

- Students
- Out-of-School, High-Risk Youth
- . community

Program Profile

The National Cancer Institute (NCI), Division of Cancer Prevention and Control, Health Education Section has two **5-year** grants focusing on implementation, evaluation, and diffusion of cancer prevention curricula in the schools. **Final** analysis is now taking place.

Solicitation is underway to award grants focusing on materials and methods development, as well as evaluation of interventions on high-risk youth.

Announcements have been placed in the 1990, 1991, and 1992 Public Health Service Omnibus Solicitation for Small Business Innovative Research requesting applications for small grants to businesses **interested** in developing new applications of health promotion technologies to schools and other sites.

Materials

• School Programs to Prevent Smoking: The National Cancer Institute Guide to Strategies that Succeed.

Available from: NCI Office of Cancer Communications, 9000 Rockville Pike, Be&e&, MD 20892

• A special issue of the *Journal of School Health* (Vol 59, no. 5) focuses on cancer education and prevention in the schools.

Available from: American School Health Association, P.O. Box 708, Kent, OH 44240

For additional information, contact:

Michael Anderson, **PhD**, MPH Prevention Research Officer National Cancer Institute 9000 **Rockville** Pike 218 EPN Bethesda, MD 20892

Phone: 301/496-8577 Fax: 301/496-8675

National Asthma Education Program

Areas of Emphasis

• Health Education

Curricula Information Program strategies, approaches media

Subject Matter:

Physical fitness Asthma

• School as a Healthy Environment

Asthma management in school environments

Physical Education/Fitness/Sports/Recreation

Related to exercise and asthma

Target Groups

Students

Elementary Students with special needs/special education Middle school/junior high

High school

- Parents
- Faculty and Staff
- . community

Program Profile

The National Asthma Education Program (NAEP) was established to (1) raise awareness of patients, health professionals, and the public that asthma is a serious chronic disease; (2) ensure the recognition of the symptoms of asthma by patients, families, and the public and the appropriate diagnosis by health professionals; and (3) ensure effective control of asthma by encouraging a partnership among patients, physicians, and other health professionals through modem treatment and education programs.

These goals will be accomplished by working with intermediary groups including major medical associations, voluntary health organizations, and community programs to educate patients, health professionals, and the public at large.

In relation to school **health** promotion, NAEP hopes to raise **awareness** of the problems of effective asthma management by identifying gaps in existing health education resources and **materials**, examining patient **self**-medication liability **issues**, and investigating barriers that prevent asthma management in schools.

Currently, NAEP is working with the Department of Education to develop asthma educational materials for school principals, teachers, nurses, and coaches. These materials will help increase the awareness of school personnel about asthma and suggest roles that school personnel can play to help students better **manage** their asthma while at school.

NAEP is also surveying school administrators (school board members) to **determine** their attitudes regarding asthma. This will be accomplished by working with the National School Boards Association to add questions regarding **asthma** to their existing **survey** *on the* **attitudes** of school administrators. **NAEP** is also investigating the barriers that prevent effective asthma management in schools, such as regulations which prevent students from administering their own medications.

Materials

- Expert Panel Report: Guidelines for the Diagnosis and Management of Asthma (manual)
- Resources Directory of Asthma Education in the Schools (booklet)
- Asthma Reading and Resource List (booklet)
- Facts About Asthma (fact sheet)
- Asthma Z. Q. Quiz (two-page informational sheet)
- Air Wise; Air Power; Open Airways; Living with Asthma Z & ZZ (asthma management instructional guides for group education)
- Your Asthma Can Be Controlled (pamphlet)
- Managing Asthma: A Guia'e for Schools
- Teach Your Patients About Asthma: A Clinician 's Guia'e

Available from: National Asthma Education Program Information Center, 4733 Bethesda Ave., Suite 530, Bethesda, MD 20814

For additional information, contact:

Robinson **Fulwood,** MSPH Coordinator National Asthma Education Program 4733 Bethesda Ave., Suite 530 Bethesda, MD 20814

Phone: 301/496-1051

School-Based Cardiovascular **Health Promotion Research Studies**

Areas of Emphasis

• Health Education

curricula Personnel training

Subject Matter:

Cardiovascular health Nutrition Tobacco

Life shills Physical fitness

Nutrition/Healthy School Food Services

Physical Education/Fitness/Sports/Recreation

• Worksite Health Promotion for Faculty and Staff

School and Community Health Promotion

Target Groups

Students

Elementary Middle school/junior high High school

Parents

Faculty and staff

Program Profile

The National Heart, Lung, and Blood Institute (NHLBI) provides leadership for a national research program in diseases of the heart, blood vessels, lung, and blood and in the uses of blood and the management of blood resources. It plans, fosters, and supports, through investigations in its own laboratories and through extramural contracts and grants, an integrated and coordiited research program that includes basic investigations, clinical trials, and demonstration and education projects related to the causes, diagnosis, treatment, and prevention of heart, blood vessel, lung, and blood diseases. The program includes studies of the clinical uses of blood and all aspects of the research training and career development in basic and clinical research relating to heart, blood vessel, lung, and blood diseases and transfusion medicine.

The school-based research studies funded at the institute fall mainly into the category of demonstration and education research. NHLBI funded some of its first school-based cardiovascular research efforts in the mid-1970s and expanded research in this area in the 1980s and 1990s. The investigative teams were multidisciplinary and were headed by behavioral (including educators) or biomedical scientists. A synthesis of the designs and results of nine of these studies was published in the journal, *Health Education Quarterly* (see "Materials"). These nine studies highlight the importance of the components in the school health program as a

framework for the multiple considerations in school health research. The **research teams addressed one or more** of the following cardiovascular risks: nutrition, physical activity, smoking, and blood pressure.

Building on many of the findings from **these** and other studies, NHLBI in 1989 launched **a** 25 million dollar multisite collaborative field trial called the Child and Adolescent Trial for **Cardiovascular** Health (CATCH). The CATCH trial focuses on behavioral changes in 8-11 year-old students (3rd-5th grades) in 96 schools in California, Louisiana, Minnesota, and Texas. The primary goal of CATCH is to assess the effects of school-and family-baaed intervention for promoting healthful behaviors in elementary school children to reduce their risk of cardiovascular disease. The interventions include classroom curricula and school environmental modifications related to food consumption, physical activity, and tobacco use, as well as family- and **home**-based programs to complement the school-based activities.

Some of the other ongoing research grants supported by the institute include smoking prevention studies; a study to test the effectiveness of blood pressure programs with inner city high school students; a study of the effects of teacher training models; a study comparing the effectiveness of classroom teachers with school nurses in teaching a sixth-grade smoking prevention program; and a test of the effectiveness of a risk-reduction program with American Indians in upper elementary grades located in rural areas. Another study is assessing the effectiveness of a school-based intervention on upper elementary students' physical activity levels in and out of school.

Two new studies to begin in the Spring of 1992 address teacher **worksite wellness** and a computer-assisted program for adolescent smoking prevention.

Materials

• *Health Education Quarterly*, Volume **16(2)**, Summer 1989

Available from: Libraries, or reprints available from the publisher, John Wiley & Sons, Inc., 605 Third Avenue, New York, NY 10158, Phone 212/850-6289.

For additional information, contact:

Elaine J. Stone, **PhD**, MPH NIH, NHLBI, DECA, CAPP, PDRB 7550 Wisconsin Ave. Federal Building, Room 604 Bethesda, MD 20892

Phone: 301/496-3503 FAX: 301/480-1357

Activities of the Human Learning and Behavior Branch

Areas of Emphasis

• Health Education
Research

Subject Matter:

Injuries/safety Tobacco HIV/AIDS

School as a Healthy Environment

Safety High-risk behavior

• School and Community Health Promotion

Target Groups

Students

Middle school/junior high High school

Program Profile

The aim of this program is to promote and support research to improve knowledge **and** understanding of the high-risk behavior in adolescents. Through such a program, more effective interventions to **prevent** health compromising behavior are anticipated.

For additional information, contact:

Peter C. **Scheidt**Medical Officer
Human Learning and Behavior Branch
National Institute of Child Health and Human Development
EPN Building, Room 633
6130 Executive Blvd.
Roclwille, MD 20852

Roclwille, MD 20852 Phone: **301/496-6591**

Activities of the Demographic and Behavioral Sciences Branch

Areas of Emphasis

• Health Education Information

Program strategies,

rogram strategies, Research and evaluation approaches, media

Subject Matter:

Family life HIV/AIDS Adolescent pregnancy and related behaviors

sexually transmitted diseases

Program Profile

The Demographic and Behavioral Sciences Branch supports research on the antecedents and **consequences** of early childbearing, pregnancy, and related behaviors. **The** program supports basic behavioral **research as well as** evaluations of theoretically based interventions. Research on these topics supported by the branch over the past 20 years has included national studies of teen pregnancy, contraceptive use, and sexual behavior; a large number of smaller studies examining the influence of social, demographic, and psychological factors on fertility-related behaviors; and evaluation of intervention programs based on the Health Belief Model. The current portfolio includes projects examining the influence of school **performance** and environment on adolescent fertility-related behaviors. Most research is supported through investigator-initiated grants awarded through the ongoing program of research funding at NIH. The branch also issues requests for applications or **requests** for proposals relevant to this subject area on an occasional basis. Program activities **are** authorized by the Public Health Service Act, Title IV, Part C, Subpart 7, sections 44841.

For additional information, contact:

Wendy Baldwin, PhD

Chief

Demographic and Behavioral Sciences Branch

National Institute of Child Health and Human Development

6130 Executive Blvd.

Executive Plaza North Building

Room 611

Bethesda, MD 20892 Phone: 301/496-1 174

Noise-Induced Hearing Loss Campaign

Areas of Emphasis

• Health Education

Program strategies,

approaches, media

Subject Matter:

Noise-induced hearing loss

School and Community Health Promotion

Target Groups

Students

Elementary Students with special needs/special education Middle school/junior high

High school

- Parents
- Faculty and Staff
- . Out-of-School, High-Risk Youth
- . Community
- Health Care Professionals, Physicians

Program Profile

The National Institute of Deafness and Other Communication Disorders (NIDCD), one of the 13 institutes in the National Institutes of Health established by law, conducts and supports research and research training on normal mechanisms as well as diseases and disorders affecting hearing and other communication processes, balance, smell, taste, voice, speech, and language. NIDCD also supports efforts to create devices that substitute for lost and impaired sensory and communications functions and conducts and supports research and research training that is related to disease prevention and health promotion. NIDCD addresses special biomedical and behavioral problems associated with people who have communication impairments or disorders.

The National Institutes of Health Consensus Development Conference on Noise and Hearing Loss on January 22-24, 1990, brought together biomedical and behavioral scientists, health care providers, and the public to address the characteristics of noise-induced hearing loss, acoustic parameters of hazardous noise exposure, individual and age-specific susceptibility, and prevention strategies.

One of the panel's recommended top priorities for the 1990's is prevention, including public **education** on **the hazards** of noise exposure. The panel's report **stressed** that noise-induce&hearing loss is insidious, permanent, and irreparable and causes communication problems that can substantially affect **one's** quality of life.

The **NIDCD** clearinghouse will establish a national noise prevention and education program. Through this program everybody in the United States will be able to learn more about noise-induced hearing loss.

Materials

• Consensus Statement: NIH Consensus Development Conference, January 22-24, 1990, Voi. No. 1, Noise and Hearing Loss

Available from: See program contact listed below.

For additional information, contact:

Marin P. Allen, PhD
Chief, Program Planning and Health Reports Branch
National Institute of Deafness and Other Communication Disorders
Building 31, Room 1B62
9000 Rockville Pike
Bethesda, MD 20892

Phone: 301/496-7243 Fax: 301/402-0018

Epidemiology and Oral Disease Prevention Program

Areas of Emphasis

• Health Education Information

Personnel training

Program strategies, approaches, media

Subject Matter:
Oral health

- Health Services
 Consultation
- School and Community Health Promotion

Target Groups

• Students
Preschool

Elementary

High school

- Faculty and Staff
- community
- Parents

Program Profile

The purpose of these program activities is to increase the oral health of school-aged children by fostering the application of research results. Specific activities include developing and providing guidelines for implementing school-based dental caries preventive regimens (such as fluoride rinse or tablet regimens and the application of pit and fissure sealants) or plaque removal to prevent gum diseases, and for providing health education and educational materials that buttress the use of these preventive procedures. Funding for establishing or continuing these kinds of programs is not available. Rather, consultation and in-service training is provided in addition to the guidelines and educational materials. The National Institute of Dental Research also has conducted two national epidemiological surveys (1979-80, 1986-87) on children ages 5 through 17. It is through this activity that one can determine that dental caries has continued to decline among these age groups. These epidemiologic surveys also found that the majority of tooth decay is in the chewing surfaces of teeth and that a small proportion of children and youth have the most oral disease. Thus, current efforts are focused on trying to increase the use of pit and fissure sealants, fluorides, and oral hygiene procedures and to focus on improving the oral health of minority students who are at highest risk for these disease&

Materials

- Guide to Implementing School-based Fluoride Regimens in School Settings
- Leaflets about fluoride use (children and adults) and sealants
- Posters about fluoride for all ages and dental sealants
- . Bookmarks about dental sealants and fluorides
- 16mm films about fluorides and periodontal diseases (free-loan)
- Videos about fluorides and periodontal disease

Available from: National Institute of Dental R-h, P.O. Box 547-93, Washington, DC 20032.

For additional information, contact:

Alice M. Horowitz Education Specialist National Institute of Dental Research National Institutes of Health WW 536 5333 Westbard Ave. Bethesda, MD 20817

Phone: 301/496-2883 Fax: 301/480-2092

Healthy People 2000

Areas of Emphasis

Health Education

Policy; promotion; coordination

Subject Matter:

Comprehensive health education

- Health Services
- School as a Healthy Environment
- Nutrition/Healthy School Food Services
- Physical Education/Fitness/Sports/Recreation
- Worksite Health Promotion for Faculty and Staff
- School and Community Health Promotion

Target Groups

- Federal Agencies
- Policymakers
- National Organizations

Program Profile

The mission of the Office of Disease Prevention and Health Promotion (ODPHP) is to provide leadership for disease prevention and health promotion among Americans. The office undertakes this mandate through the formulation of national health goals and objectives; the coordination of Department of Health and Human Services (DHHS) activities in disease prevention, health promotion, preventive health services, and health information and education with respect to the appropriate use of health care; and the stimulation of public and private programs and strategies to enhance the health of the Nation.

ODPHP has coordinated the national initiative to develop the *Healthy People 2000* National Health Promotion and Disease Prevention Objectives to be achieved by the year 2000. *Healthy People 2000* is a set of 300 national objectives arranged under 22 priority areas. Twenty of these objectives directly relate to school health education or other aspects of comprehensive school health programs. Over one-third of the 300 objectives can either be directly attained by schools or the attainment of these objectives can be influenced in important ways by schools.

Through the *Healthy People 2000* initiative, ODPHP works to promote the implementation of school health programs and to build partnerships between health and education and between government and private sector efforts relating to school health.

ODPHP has entered into a limited number of three-year cooperative agreements with national membership organizations to promote the *Hedthy People 2000* objectives as they relate to particular populations or to particular settings. A cooperative agreement with the American Association of School Administrators addresses the school setting. Another cooperative agreement, with the American Medical Association Department of Adolescent Health, addresses the youth population, including school health issues.

Materials

- Hedthy People 2000: National Hedth Promotion and Disease Prwention Objectives (Full Report, \$3 1.00; Summary Report, \$9.00; both available from the Government Printing Office, 202/783-3238)
- Healthy People 2000: National Health Promotion and Disease Prevention Objectives and Healthy Schools (Reprint from the *Journal* of School *Hedth*, September, 1991. Contact the *Journal* of School Health, P.O. Box 708, Kent, Ohio, 216/678-1601, for ordering information)
- *Hedthy Kids for the Yew- 2000: An Action Plan for Schools* (booklet; available from the American Association of Schools Administrators, 1801 North Moore St, Arlington, VA 22209-9988)
- Hedthy Youth 2000: National Hedth Promotion and Disease Prwention Objectives for Adolescents (Single copies available free from AMA Department of Adolescent Health, 515 N. State St, Chicago, IL 60610; 3 12/464-547 1)

For additional information, contact:

Robert St. Peter, M.D.
Coordinator, Children and School Programs
Office of Disease Prevention and Health Promotion
Switzer Building, Room 2132
330 c St., SW
Washington, DC 20201

Phone: **202/205-8** 180 Fax: **202/205-9478**

Interagency Ad Hoc Committee on Health Promotion Through the Schools

Areas of Emphasis

- Health Education
- Health Services
- School as a Healthy Environment
- Nutrition/Healthy School Food Services
- Physical Education/Fitness/Sports/Recreation
- Worksite Health Promotion for Faculty and Staff
- School and Community Health Promotion

Target Groups

• Federal Agencies

Program Profile

Since 1983, the Office of Disease Prevention and Health Promotion has coordinated and chaired a Federal Interagency Ad Hoc Committee on Health Promotion through the Schools. This committee meets bimonthly and serves as au on-going forum for sharing information among Federal agencies at the staff level about programs and activities related to school health.

In 1983, the U.S. Department of Health and Human Services and the U.S. Department of Education cosponsored an "Interagency Meeting on Health Promotion Through the Schools." In preparation for this meeting, an informal survey was carried out which noted that school health-related activities were going on in numerous offices and agencies of the Federal government. Participants in this interagency meeting expressed the need for an on-going forum to discuss Federal school health initiatives.

The Interagency Ad Hoc Committee continues to meet regularly. In July 1990, a member of the staff of the Department of Education's Program on Comprehensive School Health Education began cochairing the committee along with the Coordinator of Children and School Programs at the Office of Disease Prevention and Health Promotion in the Department of Health and Human Services. Participating on the Interagency Ad Hoc Committee are individuals representing agencies and offices in the Departments of Agriculture, Defense, Education, Health and Human Services, Justice, and Transportation, and the Environmental Protection Agency.

The committee has recently conducted an update of the 1983 survey to ascertain the extent of Federal programs and activities applicable to health promotion through the schools.

Two years ago, funds were contributed from several agencies represented on the committee to carry out a market research project on health communication with hard-to-reach youth, which is currently being conducted.

Materials

• Hedthy Schools: A **Directory** of **Federal** Activities Related **to** Hedth **Promotion Through** the Schools

Available from: ODPHP National Health Information Center, P.O. Box 1133, Washington, DC 20013-1133. Phone: **800/336-4797 (301/565-4167** in Maryland).

For additional information, contact:

Robert St. Peter, **M.D.**Coordinator, Children and School Programs
Office of Disease Prevention and Health Promotion **Switzer** Building, Room 2132
330 c St., SW
Washington, DC 20201

Phone: **202/205-** 8 180 Fax: **202/205-9478**

The Healthy **EDGE** in Schools: **Eating, the Dietary Guidelines, and Education**

Areas of Emphasis

 Health Education Personnel training

Subject Matter:
Nutrition

• Nutrition/Healthy School Food Services

Target Groups

- Parents
- Faculty and Staff Food Service Staff School Administrators

Health Educators School board members

Teachers

- community
- Media

Program Profile

The 1980 Dietary Guidelines for Americans, revised in 1985 and 1990, and the 1988 Surgeon General's Report on Nutrition and Health both link diet and health. But many school districts are less certain than others about how to integrate this information into their education and food service programs. School food service personnel, teachers, and others in the education community have had to rely largely on their own experience and education, which may vary significantly.

The School Food Service Foundation, working with the Office of Disease Prevention and Health Promotion, has responded by developing *The Healthy EDGE in Schools: Eating Dietary Guidelines, and Education. Healthy EDGE* consists of a motivational videotape and a companion "how-to" manual highlighting successful, cost effective ways of incorporating the *Dietary Guidelines for Americans into* school food service and offering concrete information about nutrition approaches, promotions, and networking with other members of the education community.

To carry out this project, the foundation received **funding** under the terms of a cooperative agreement with the U.S. Department of Health and Human Services (DHHS). This agreement is in keeping with DHHS's Healthy People 2000 nationwide objectives. In addition,' the Beef Industry Council of the Meat Board contributed support for this project.

The video and manual will be used (a) for inservice training of school food service personnel in menu planning, recipe development, food purchasing, promotion planning, nutrition and student involvement activities; and (b) with the broader education "team"-teachers, parents, administrators, school health personnel, coaches, etc.-to help them better understand and/or communicate the relationship between diet and health.

Throughout the coming year, a series of mini manuals will be published in the *School Food Service Journal*, expanding on the information presented in the original manual.

In planning these materials, the School Food Service Foundation convened an "Idea Seminar," bringing together 42 leaders in school food service and State child nutrition programs, **as** well as representatives of government and the food industry and experts in the ares of health and physical fitness. **The** result of this two-day session was a tremendous volume of information that was distilled and presented in the video and **manual**.

Materials

- The Healthy EDGE in Schools (Eating, the Dietary Guidelines, and Education) (13-minute motivational videotape; \$15*)
- . Series of Training Manuals (\$7.00 each*)
 - * Non-member prices; bulk discounts available

Available from: The American School Food Service Association, 800/728-0728

For additional information, contact:

Elena **Carbone,** MS, RD Nutrition Advisor Office of Disease Prevention and Health Promotion **Switzer** Building, Room 2132 330 c St., SW Washington, DC 20201

Phone: **202/205-9007** Fax: 2021205-9478

Nutrition Guidance for Child Nutrition Programs

Areas of Emphasis

• Nutrition/Healthy School Food Services

Target Groups

• U.S. Department of Agriculture Child Nutrition Program Cooperators

Program Profile

The Child Nutrition and WIC Reauthorization Act of 1989 requires the Secretary of Agriculture and the Secretary of Health and Human Services to jointly develop a publication to be entitled Nutrition Guidance for Child Nutrition Programs. This publication will be distributed in Spring 1992, to all school food **service** authorities, institutions, and organizations participating in the Child Nutrition Programs.

The target audience, approximately 275,000 program cooperators, varies from food service directors of large multi-unit school systems to family day care providers in a home setting.

This nutrition guidance, developed jointly by the U.S. Departments of Agriculture and Health and Human Services, gives nutrition advice to those responsible for preparing meals for children under the Child Nutrition Programs. This guidance is based on *Nutrition and Your Health: Dietary Guidelines for Americans, the third* edition, 1990, which provides advice for healthy Americans ages 2 and over-not for younger children and infants, whose dietary needs differ.

The Nutrition Guidance for Child Nutrition Programs is the first step in a series of revised technical assistance efforts to help food service personnel and other persons responsible for feeding children improve children's health by offering meals in the Child Nutrition Programs that reflect current dietary guidelines.

Materials

• Nutrition Guidance for **Child** Nutrition Programs (booklet)

Available from: See program contact listed below.

For additional information, contact:

Director, Nutrition Policy Staff
Office of Disease Prevention and Health Promotion
Switzer Building, Room 2132
330 c St., SW
Washington, DC 20201
Phone: 202/205-9007

Phone: 202/205-900 Fax: 202/205-9478

Adolescent Family Life Demonstration Grants Program

Areas of Emphasis

Health Education

Curricula Information

Subject **Matter:**

Comprehensive health Alcohol or other drugs Nutrition

education

Tobacco Life skills Family life

HIV/AIDS

Health Services

Counseling/mental health

School and Community Health Promotion

Target Groups

Students

Middle school/junior high High school

Parents

Faculty and Staff

Program Profile

The Adolescent Family Life Legislation (Title XX of the Public Health Service Act) was enacted in 1981 and is administered by the Office of Adolescent Pregnancy Prevention Programs of the Office of Population Affairs. It authorizes the funding of community-based and community-supported demonstration grants that address the problems associated with adolescent sexuality and adolescent pregnancy. Public or private nonprofit organizations and agencies may apply for funds for care or prevention projects.

Care projects must provide, on-site or by referral, 10 required services which together comprise comprehensive and integrated health, education, and social services.

Prevention projects are value-based, family-centered approaches that provide family life services that discourage the early onset of sexual activity and promote abstinence for unmarried adolescents.

Care projects have been carried out in regular and alternative schools. Prevention projects have tested family life curricula in school settings.

The availability of funds is announced in the Federal Register; funding is competitive.

The Office of Adolescent Pregnancy Programs is currently funding 30 care and 2.6 prevention projects.

Materials

- Adolescent Family Life Program: Highlights from Prevention Demonstration Projects
- Summary: Adolescent Family Life Prevention Curricula. Summary of curricula that have been developed and/or disseminated with grants from the Office of Adolescent Pregnancy Programs (OAPP)
- Many Teen Are Saying "No' (Free in limited quantities from the Family Life Information Exchange)

Available from: See program contacted listed below.

For materials or additional information, contact:

Patricia Funderburk Director, Office of Adolescent Pregnancy Programs Office of Population Affairs 200 Independence Ave., SW, Room 726E Washington, DC 20201

Phone: 202/609-7473

Healthy Children Ready to Learn Initiative

Areas of Emphasis

. School Readiness

Target Groups

- Students
 Preschool
- Parents
- community
- Policy Makers; Federal Program Administrators; Organizations

Program Profile

The Surgeon General's "Healthy Children Ready to Learn Initiative" has grown out of a request from the White House to "mobilize the Nation" toward meeting the health and education needs of the children of the Nation. This effort has been designed to fulfill the health requirements as outlined in the President's first national education goal: By the year 2000, all children in America will start school ready to learn.

This initiative has been underway since the Summer of 1990 and forms a critical part of the Surgeon General's agenda. Through the advice and direction of an advisory group comprised of White House staff and key Federal program directors from three departments, the initiative has been defined with clear articulation of operating principles and goals. The operating principles include, first, all children have a right to be healthy; second, a "good science, good sense" approach is needed; and third, healthy children ready to learn come from healthy families.

The goals of the initiative are to:

- Articulate the health and education rights of all children.
- Build upon the strength of existing programs, routinely highlight specific programs that are in some unique manner addressing the health component of the President's first national education goal, and share this information with other communities.
- Support activities that would facilitate the role of all sectors of society-particularly **parents** and families-in managing and promoting the health of children, thereby contributing to their optimum education.
- Build upon existing resources and programs to explore new ways of addressing the health and education needs of children.

These principles and goals have been communicated throughout Government and at every opportunity to the multitude of audiences and professional organizations the Surgeon General addresses. **The** initiative builds upon the Secretary of the Department of Health and Human Service's Program Directions and the Year 2000 Health Promotion and Disease Prevention Objectives for the Nation.

Upcoming events and activities include numerous presentations, a dialogue with all **health** and education professional organizations, an immunization education and action program, and a national conference on Healthy Children Ready to **Learn**, with a focus on the critical role of parents and **families**.

For additional information, contact:

Office of the Surgeon General Hubert H. Humphrey Building, Room 718-E 200 Independence Ave., SW Washington, DC 20201

Phone: **202/690-7** 163

President's Challenge

Areas of Emphasis

- Physical Education/Fitness/Sports/Recreation
- Fitness Awards Program; Physical Fitness

Target Groups

• Students
Elementary

Middle school/junior high

High school

Program Profile

The President's Council on Physical Fitness and Sports (PCPFS) operates under an Executive Order from the President of the United States. The general statement says that the council will serve as a catalyst to promote, encourage, and motivate the development of physical fitness and sports programs for all Americans.

A small staff office with a budget of approximately \$1.4 million, the PCPFS, in addition to providing technical support to various public and private organizations, has general fitness information available to the public. Information is available on resources available to schools, communities, business, and industry, along with some promotional materials.

The President's Challenge is a program of the PCPFS which began in 1966. With the implementation of the Presidential Physical Fitness Award, youngsters ages 6-17 can strive for one of 3 awards as part of the President's Challenge:

- The Presidential Physical Fitness Award **recognizes** an outstanding level of fitness for those who **score** at or above the 85th percentile on all **5** items on the President's challenge (curl-ups, shuttle run, 1 mile run/walk, pull-ups, and V-sit reach).
- The National Physical Fitness Award **recognizes** a basic yet challenging level of physical fitness for students scoring at or above the 50th percentile on all 5 items.
- The Participant Physical Fitness Award recognizes boys and girls who attempt all 5 test items but whose scores fall below the 50th percentile on one or more of them.

The State Champion Award recognizes the top schools in each State that qualify the highest percentage of students for the Presidential Physical Fitness Award.

Materials

- Physical Education: A Performance Checklist
- The Physical & Underdeveloped Child
- Get Fit: A Handbook for Youth Ages 6-17
- The President's Challenge Physical Fitness Program Packet
- 1985 National School Population Fitness Survey

Available from: See program contact listed below.

For additional information, contact:

Christine G. Spain
Special Assistant to the Executive Director for Research, Planning, and
Special Projects
President's Council on Physical Fitness and Sports
Market Square East Building, Suite 250
701 Pennsylvania Ave., NW
Washington, DC 20004

Phone: 202/272-3424 Fax: 202/504-2064

Early and Periodic Screening, Diagnosis, and Treatment

Areas of Emphasis

Health Education

Anticipatory guidance

Subject Matter:

Alcohol or other drugs

Injuries/safety Tobacco

Family life

Cardiovascular health **Environment** (of lead)

Cancer

HIV/AIDS

• Health Services

Immunizations School-based health Screening

• Nutrition/Healthy School Food Services

Target Groups

Students

Preschool High school

Elementary Students with special needs/special education Middle school/junior high

Violence/conflict resolution

Counseling/me&al health

Nutrition

Dental health

Program Profile

The Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program is a Federally sponsored Medicaid program administered by each State, in which Medicaid eligible families may voluntarily participate. In some States, the health department manages the program; in some States, the welfare department manages it; and in a few States, a special commission is responsible for the program. The program is intended to provide a comprehensive range of health care services to children of Medicaid eligible families.

Materials

• EPSDT — A How-To Guide for Educational Programs

Available from: U.S. Government Printing Office, 202/783-3238.

For additional information, contact:

William **Hiscock**Chief, Program Initiatives Branch
Medicaid Bureau
Health Care Financing Administration
East High Rise, Room 236
P.O. Box 26678
Baltimore, MD 21207

Phone: 301/966-3275

Supplemental Security Income Program

Areas of Emphasis

• Program providing monthly cash benefits and access to health-related **programs—such** as Medicaid and Food Stamps-for blind and disabled persons, including children

Target Groups

Students

Preschool High school Elementary Students with special needs/special education Middle school/junior high

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- community
- Family members, medical/paramedical community members who have information about children with disabilities

Program Profile

The 1972 Amendments to the Social Security Act (P.L. 92-603) established the Supplemental Security Income (SSI) program.

The purpose of SSI is to provide a basic level of income support to needy aged, blind, and disabled persons (including children) based on nationally uniform eligibility standards and payment levels.

The program is administered by the Social Security Administration (SSA) and funded from Federal general revenues. A local network of 1,300 Social Security Administration district offices facilitates program participation for blind and disabled children.

The program provides income so that disabled children can transition to employment. SSI recipients may be eligible for **noncash** food and shelter programs, and for Medicaid in many States.

SSA recently awarded 25 cooperative agreements under the SSI Outreach Demonstration program, to demonstrate effective approaches for identifying potentially SSI eligible individuals and assisting them through the application process. Several of the projects specifically target blind and disabled infants, children, and youth **transitioning** to the workforce.

SSA is changing the way it determines if a child is disabled, because of a recent Supreme Court case. As a result, many more children are expected to be eligible for SSI benefits which will help them make the transition to the workplace. SSA would like to work hand-in-band with the schools to help identify those children. We feel that the Individual Education Plan, required under P.L. 94-142, should include SSI referrals, as appropriate.

For additional information, contact:

Ms. Rhoda M. G. Davis
Associate Commissioner for Supplemental Security Income
Social Security Administration
6401 Security Blvd.
300 Altmeyer Building
Baltimore, MD 21235

Phone: 410/965-6210

Head Start

Areas of Emphasis

Health Education

Curricula Information

Subject Matter:

Comprehensive health Nutrition Dental health

education

• Health Services

Immunization Screening Counseling/mental health

• School as a Healthy Environment Safety

• Nutrition/Healthy School Food Services

• School and Community Health Promotion Efforts

Target Groups

Students

Preschool Students with special needs/special education

• Parents

Program Profile

Head Start is a comprehensive child development program for preschool children, authorized under Title I of the Human Services Reauthorization Act of 1990 **(P.L.** 101-501). The **FY91** appropriation is **\$1,951,800,000**.

Head Start provides comprehensive services to low-income preschool children and their families, emphasizing cognitive and language development, so emotional development, physical and mental health, nutrition, social services, and parent involvement. During the **1989-90** school year, medical and dental screening and **treatment** services were provided to virtually all of the 540,930 children enrolled in nearly 1,300 Head Start programs nationwide. Included in this figure are 67,140 children with disabilities, who make up 13.47 percent of Head **Start's** enrollment.

Since the program began in 1965, approximately 12 million children have received health services through Head Start.

Materials

- Head Start Program Performance Standards
- Health Gwrdination Manual
- Handbook for Nutrition Specialists
- Training Guide for Food Service Personnel in Program for Young Children
- Handbook for Mental Health Coordination

Available from: See program contact listed below.

For additional information, contact:

Douglas **Klafehn**Deputy Associate Commissioner
Head Start Bureau
P.O. Box 1182
Washington, DC 20013

Phone: 202/205-8569

Child Abuse and Neglect Programs

Areas of Emphasis

. Health Education

curricula Information Personnel training

Subject Matter:

Alcohol or other drugs

Violence/conflict resolution

Family violence; child abuse and neglect; sexual abuse

• School and Community Health Promotion

Target Groups

• Students
Preschool
High school

Elementary Students with special needs/special education Middle school/junior high

- Parents
- Faculty and Staff
- . community

Program Profile

All of the programs of the National Center on Child Abuse and Neglect (NCCAN) may have some relevance for school health. The Clearinghouse on Child Abuse and Neglect could be utilized for a comprehensive literature search on specific school-based and related projects.

Two grants were funded in 1987 to look at the relationship of child maltreatment to children's social and emotional development and school performance. A number of the current research grants are also looking at such relationships.

Nine Parent-Adolescent Mediation demonstration projects were funded in 1987 that could have applicability for use in the school systems.

Nine **5-year** grants were awarded in September 1989, for the planning and development of model, comprehensive, **community-based** child physical abuse and neglect prevention programs that include **school-based**, age-specific prevention programs for school-age children.

Materials

- Measuring Actual Reduction of Risk to Child Abuse Attributable to a School-Based Prevention Program (1989) (final report from Grant No. 90CA1334)
- User Manual on The Educator's Role in the Prevention and Treatment of Child Abuse and Neglect (1984) (This publication is currently being updated)
- Child Abuse, Chronic Acting out Students, and Public School Interventions: A Manual for Educators (1986)
- Mini-Series on Psychological Maltreatment of Children (School Psychology Review, 1987)

Available from: The Clearinghouse on Child Abuse and Neglect Information, P.O. Box 1182, Washington, DC 20013, 202/821-2086

For additional information, contact:

National Center on Child Abuse and Neglect Switzer Building, Room 2316 330 c St., SW Washington, DC 20201

Phone: 202/205-8586

Activities of the Administration on Developmental Disabilities

Areas of Emphasis

Health Services

Counseling/mental health

Screening

Testing and diagnosis for developmental disabilities

• Provides Federal money to States to plan advocate services (including health) in support of persons who are developmentally disabled. Also provides Federal **funds** to universities to train professionals (including health professionals).

Target Groups

Students

Students with special needs/special education

Parents

Program Profile

Programs are funded under the authority of The Developmental Disabilities Assistance and Bill of Rights Act (**DD** Act), P.L. 100-M. This statute expired October 1, 1990, and reauthorization is pending. The program has 4 components/purposes as follows: Basic State Grants are awarded to States on a formula basis to establish a **Planning** Council, which develops and implements a comprehensive plan for meeting the needs of persons with developmental disabilities. Protection **and** Advocacy Systems are established by providing formula grant funds to States to operate a system to protect **and** advocate for the rights of persons of developmental disabilities. The University Affiliated Programs (**UAP**) provide operational and administrative support to a national network of universities involving interdisciplinary training; the demonstration of exemplary services and **technical** assistance; **and** the dissemination of information to increase the independence, productivity, and community integration of persons with developmental disabilities. Funding history **FY88 \$92,867,000**; FY89 **\$95,000,000**; FY90 **\$98,500,000**. Program competitions are tied to DD Act requirements: 44 **UAPs**; 3 satellite centers ate funded. **UAPs** compete for training grants: early intervention (11); elderly (7); and community-based programs (14). There is a competition for the **final** program component-open grants and contracts with public or nonprofit private entities. Priority areas for FY90 were self-advocacy/empowerment; data collection, technical assistance, community integration; pediatric AIDS; **and** minorities with developmental disabilities.

For additional information, contact:

Eisbeth Wyatt
Developmental Disability Program Specialist
Administration on Developmental Disabilities
200 Independence Ave., SW
Washington, DC 20201
Phone: 202/245-0841

Fax: 202/690-5841

Prevention and Intervention for Illegal Drug Use and AIDS Among High-Risk Youth

Areas of Emphasis

• Health Education

Program strategies, approaches, media

Subject **Matter:**

Alcohol or other drugs

HIV/AIDS

Violence/conflict resolution

Life shills

• Health Services

Counseling/mental

health

Screening

Target Groups

• Students

Middle school/junior high High school

- Parents
- Faculty and Staff
- . community
- Out-of-School, High-Risk Youth
- Exploited and Homeless Youth

Program Profile

This program is pursuant to the Juvenile Justice and Delinquency Prevention Act as amended, subpart II-Special Emphasis Prevention and Treatment Program, Section 261(a). The purpose of this program is to improve public and private services to high-risk youth, less than 18 years of age in order to deter illegal activities and to divert them from initial contact- with or continued involvement in the Juvenile Justice System. It is designed to develop effective responses to illegal drug use, serious delinquent activity, sexual exploitation, and the companion problem of AIDS. The program was awarded \$399,961 for a program period of 9-1-89 to 8-31-91. The program has completed an analysis of relevant research as well as an extensive survey of programs across the country with an indepth study of six programs. The program is in the initial stage of model program development with development of a companion technical assistance program and materials and an information dissemination plan.

For additional information, contact:

Eugene Rhoden Assistant Director, Special Emphasis Division Office of Juvenile Justice and Delinquency Prevention 633 Indiana Ave., SW, Room 758 Washington, DC 20531

Phone: **202/307-** 1150 Fax: 20215 14-6382

Effective Systemwide Strategies to Combat Youth **Drug and Alcohol Abuse**

Areas of Emphasis

• Health Education
Curricula

Subject Matter:
Alcohol or other drugs

- School and Community Health Promotion
- Training; Information Sharing

Target Groups

- Parents
- Faculty and Staff
- . community

Program Profile

The purpose of this project is to develop the capability for a multifaceted effort within communities to combat youth drug and alcohol abuse. The goal is to help communities **assess** their resources and use them to develop a comprehensive and coordinated system to address drug and alcohol-related problems.

A curriculum manual in the form of modules has been developed, and it features substance abuse prevention, **intervention**, and treatment.

Materials

• Training Curriculum Manual

Available from: gee program contact listed below.

For additional information, contact:

Frank Smith
Program Manager
Office of Juvenile Justice and Delinquency Prevention
633 Indiana Ave., NW
Washington, DC 20531

Phone: 202/307-5914 Fax: 202/5 14-6382

Cities in Schools, Inc.-Partnership Plan

Areas of Emphasis

• Health Education

Subject **Matter:**

Alcohol or other drugs Violence/conflict resolution Life skills

Family life HIV/AIDS Violence prevention

• Health Services

Counseling/mental Referrals for dental screening health and medical treatment

• School as a Healthy Environment

Violence prevention

• Physical Education/Fitness/Sports/Recreation

- School and Community Health Promotion
- Coordination

Target Groups

Students

Elementary students at risk of dropping out Middle school/junior high

High school

- Parents
- community

Program Profile

The national Cities in Schools, Inc. (CIS) is a nonprofit corporation supported through private contributions and, since July 1984, by the U.S. Department of Justice, Office of Juvenile Justice Delinquency Prevention. Since March 1986, support has been through an interagency agreement among the U.S. Departments of Justice (the lead agency), the Department of Health and Human Services, the Department of Labor, and the Department of Education. From April 16, 1990-April 15, 1991, the interagency agreement included the Department of Justice, the Department of Commerce, the Department of Health and Human Services, and the Department of Labor. Specific funding amounts vary from year to year, but are approximately from \$1,400,000 to nearly \$2 million per year.

The national **organization** provides training and technical assistance to communities and States to develop their own independent, incorporated nonprofit local CIS program and also emphasizes the development of new alternative schools within existing school systems. The national **organization** delivers formal training, conducts regional conferences, and provides on-site or regional board and staff development training for local programs. The training program encompasses all **aspects** of program development, **service** delivery, and administration. National services to localities are delivered at no charge to the community or local program.

Local CIS programs implement comprehensive dropout prevention programs that feature **coordinated** health, educational, and social services delivered to students enrolled in public schools. Services are provided at the school site by staff who are repositioned from existing community-based agencies and public agencies and by volunteers (or sometimes hired by the local program). The exact services that are provided at any given school site will vary from local program to program. All CIS local programs include substance abstinence counseling, personal counseling, **and** health screening among their services. Students enrolled in CIS programs are involved in a case management system that helps to assure that the student's need for support services are met. Where specific services are not included at the school, arrangements for referrals are made.

Local programs are supported through their own **grantsmanship** efforts from a variety of sources, including the local/State education agency, the JTPA system, other Federal and State programs, private foundations and individual contributions. In a few States, State legislation supports local CIS organizations, especially their expansion into additional school sites.

As of June 1990, there were a total of 46 local CIS programs in 16 States providing services at 217 school sites to 29,556 students. There are now State CIS programs operating in Texas, Georgia, Florida, North Carolina, South Carolina, Virginia, **Arkansas**, and New Jersey, which **assist** in the development of Statewide coordinated services for at-risk youth and their families and the development and operations of CIS local programs.

Materials

- Building a Cities in Schools Program: A Replication Process (241-page manual)
- The Cities in Schools Project Operation Manual

Available from: Cities in Schools, Inc., 1023 15th St., NW, Washington, DC 20005

For additional information, contact:

Sharie Cantelon Program Manager Office of Juvenile Justice and Delinquency Prevention 633 Indiana Ave., NW, Room 633 Washington, DC 20531

Phone: 202/307-59 14

Super Teams of the Washington Metropolitan Area

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Peer counseling

Subject Matter:

Alcohol or other drugs Life shills Family life

HIV/AIDS

• Health Services

Counseling/mental health

• School and Community Health Promotion

• Physical Education/Fitness/Sports/Recreation

Target Groups

Students

Elementary Middle school/junior high High School

Parents

Faculty and Staff

. Community

Program Profile

Funded under the Juvenile Justice and Delinquency Prevention Act of 1984 as amended, Super Teams is a drug and alcohol prevention program utilizing peer counseling centered in high schools. Funding history: 1985, \$42,980 of which \$9,000 came from the Drug Enforcement Administration; 1987, \$50,000; 1988, **\$50,000**; 1989, \$37,500; 1990, \$50,000.

The program trains a group of student leaders to resist drugs and alcohol and has them, in turn, affect other youth. **Founded** by professional athletes and in conjunction with the National Football League Players Association, Super Teams obtains support from faculty and parents and selects students to participate in an intensive residential training program where they learn techniques to combat peer pressure regarding use of alcohol and drugs. They also learn about HIV, nutrition, and family life; however, the major emphasis is on alcohol and drugs **and** academic achievement. Trained students develop programs throughout the school and develop outreach programs to junior high school and elementary schools in the area.

Super Teams has been **institutionalized** in several schools in the District of Columbia, and **recent** funding has allowed expansion into four schools in Prince George's County, Maryland.

For additional information, contact:

Brigman Owens, President Super Teams of the Washington Metropolitan Area 1101 15th St., NW Washington, DC 20005 Phone: 202/223-3749

Job Training Partnership Act Program

Areas of Emphasis

• Health Education Information

Referral

Subject Matter: Alcohol or other drugs

Target Groups

• Economically disadvantaged youth ages 16-21 (in or out of school) and adults; up to 10 percent of participants may have barriers to employment, e.g., school dropout, handicapped, and not be economically disadvantaged

Program Profile

The Job Training Partnership Act (JTPA), P.L. 97-300, was enacted in 1982. Title IIA, Training Services for Disadvantaged Youth and Adults, provides a broad range of services to the economically disadvantaged to increase their employment and earnings and reduce welfare dependency. Title IIB, Summer Youth Employment, is designed to enhance basic educational skills of youth, encourage high school completion, and provide youth exposure to the world of work.

The Federal government allocates funds-about \$1.7 billion for Title **TA** and about \$700 million for Title IIB-to States by formula, and States, in turn, allocate funds using the same formula to local communities, called Service Delivery Areas, to support training and related services.

Under Titles **IIA/B**, local private Industry Councils plan and oversee these and other training and employment programs in partnership with local elected officials.

Title II services are provided at local discretion and based on local labor market conditions and resources, e.g., assessment and career counseling, basic skills and job skills training, work behavior and attitude training, and job development and placement. A limited portion of local funds-up to 15 percent-can be used for support services such as child cam, transportation, or substance abuse education and referral to help "trainees" continue their **participation**. Health/substance abuse education and referral services vary according to local service delivery area needs and **resources**.

Title IIB provides subsidized temporary summer jobs for poor youth. Education services are playing an increasingly important role in the summer youth program. All local areas are required to assess youth and provide basic educational services where needed in addition to jobs. It serves about 620,000 youth each year.

Many States and local areas provide services to many individuals with substance abuse-related problems and employ strategies for preventative measures.

Employment and Training Administration planning guidance to Governors for JTPA Program Years 1990 and 1991 (July 1, 1990–June 30, 1992) encouraged States to promote drug awareness and drug education efforts for JTPA participants.

The Department of Labor administers a model research and development program to address a variety of training and employment issues. A number of these demonstration projects may include a component on life skills or substance abuse education.

For additional information, contact:

Mr. Hugh Davies
Director, Office of Employment and Training Programs
Employment and Training Administration
U.S. Department of Labor
200 Constitution Ave., NW, Room N-4703
Washington, DC 20210

Phone: **202/535-0580** Fax: **202/535-05** 14

Job Corps Health Program

Areas of Emphasis

• Health Education

Information Personnel training Program strategies, approaches, media

Teaching guide

Subject **Matter:**

Comprehensive health Alcohol or other drugs Injuries/safety

education

Nutrition Tobacco Dental health

Health Services

Counseling/mental health Immunizations School-based health services

• Nutrition/Healthy School Food Services

• Physical Education/Sports/Recreation

Target Groups

Students

Students with special needs/special education

- Faculty and Staff
- Out-of-School, High-Risk Youth

Program Profile

The Job Corps is a major training and employment program administered by the Department of Labor to alleviate the severe employment problems faced by disadvantaged youth throughout the United States. Job Corps was originally established by the Economic Opportunity Act of 1964; current **authorization** for the program is Title IV-B of the Job Training Partnership Act.

Job Corps is designed to assist young people who both need and can benefit from the wide range of services provided in the residential setting of a Job Corps center. These services include basic education, vocational skills training, work experience, counseling, health care, and related support services. Enrollees are impoverished and unemployed young people between the ages of 16 and 21 who have volunteered for the

program. These youth are typically from such debilitating environments that they must be relocated to residential centers in order to beaefit from the intensive type of services provided through the Job Corps program.

Job Corps operates through a partnership of the government, Department of Labor, and the private sector. The government provides the facilities and equipment for Job Corps centers and the funding for recruitment of enrollees, center operations and placement of enrollees upon termination. Major corporations and nonprofit organizations manage and operate 77 Job Corps centers under contractual agreements with the Department of Labor. The Departments of Agriculture and Interior operate 30 Job Corps centers, called civilian conservation centers, on public lands. Labor union and trade associations provide specialized training at many Job Corps centers.

Materials

Job Corps has developed a series of technical assistance guides for use by its programs. These include:

- Immunization and communicable Disease
- Health Standards and Evaluation
- Guide for the **Center** Mental Health **Consultant**
- Nutrition and Its Role in Health Care
- Health Aspects of Sports and Athletics
- Guidelines for Health Facilities and Staffing

Available from: The McKinney Job Corps Distribution Center, P.O. Box 750, McKinney, TX 75069, 2146424623

For additional information, contact:

Charles R. Hayman, MD Medical Director U.S. Department of Labor Office of Job Corps 200 Constitution Ave., NW N-4510-FPB Washington, DC 20210

Phone: **202/535-0571** Fax: **202/535-05** 14

Impaired Driving Prevention Programs

Areas of Emphasis

Health 'Education

Curricula Information

Personnel training

Program strategies, approaches, media

Subject Matter:

Alcohol or other drugs Injuries/safety Life skills

School and Community Health Promotion

Target Groups

- Students
 High school
- Parents
- Faculty and Staff
- . Community

Program Profile

The objective of the National Highway Traffic Safety Administration (NHTSA) youth impaired-driving prevention program is to reduce injury and death to young persons resulting from alcohol- and other drug-related motor vehicle crashes.

Schools play a pivotal role in youth traffic safety, for they are the settings in which most youth receive driver and traffic safety education. NHTSA student programs emphasize not only school-based activities, but extracurricular, community, and parent activities as well.

NHTSA's efforts to reduce impaired driving among young persons have included a variety of research and programmatic activities. Past research activities included field tests of various school-based approaches to teaching adolescents about alcohol and driving; identification of the assumptions upon which youth drinking-driving prevention programs are based; identification of youth knowledge, attitudes, and behavior regarding drinking and driving; and investigation of approaches to assist parents in preventing drinking and driving among their children. Programmatic activities have included school assembly programs (Road-to-Winning and emergency highway safety programs) among school administrators.

Current NHTSA efforts to reduce impaired driving among youth include promotion and support of programmatic activities (e.g., Taking the Lead, Team Spirit, Project Graduation) and student safety programs, as well as several new initiatives, including:

- An effort with the National 4-H Council to provide training and technical assistance in coalition building
 for communities interested in reducing drug and alcohol use, as well as impaired driving, by young
 persons.
- Revising the publication Guidelines for a K-12 Traffic Safety Education Curriculum to focus on secondary grades, update information, and identify germane curricula materials.
- Development of a Student Safety Handbook, targeted to parents and teachers, which will provide information on traffic safety issues affecting students of all ages.
- Development of NHTSA's "Youth Kit" containing K-12 curriculum guides, student safety club materials, provisional licensing and fraudulent ID information, and examples of comprehensive community programs.

Materials

- Team Spirit: A Community-Based Youth Leadership Program to Prevent Abuse of Alcohol and Other Drugs (Brochure, Manual, and Program Guide)
- Taking the Lead: A Student Traffic Safety Action handbook (Handbook, Facilitator's Guide and Video)
- Join the Celebration-Operation Prom Graduation (Handbook, Public Service Announcement, Poster)
- Forum on Youth Traffic Safety Initiatives (Handbook)
- Youth Driving Without Impairment: A Community Challenge (Handbook)
- Shifting Into Action: Youth and Highway Safety (Handbook)
- A Winning Combination: An Alcohol, Other Drug and Traffic Safety Handbookfor College Campuses (Manual/Handbook)

Available from: See program contact listed below.

For additional information, contact:

Dr. Maria Vegega Program Analyst Office of Alcohol and State Programs National Highway Transportation Safety Administration DOT, NTS-22 400 7th St., SW, Room 5130 Washington, DC 20590

Phone: 202/366-2719 Fax: 202/366-2766

Occupant Protection-Children and Youth

Areas of Emphasis

Health Education
Curricula
Program strategies,

Information

Personnel training

Subject Mutter: Injuries/safety

approaches, media

- Worksite Health Promotion for Faculty and Staff
- School and Community Health Promotion

Target Groups

Students

Preschool High school

Elementary

Middle school/junior high

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community
- General Population

Program Profile

The objective of the National Highway Traffic Safety Administration's (NHTSA) Office of Occupant Protection is to increase the use of seat belts, child safety seats, and automatic crash protection to the maximum level possible. This traffic safety program comes under the authority of the Highway Safety Act of 1966, as amended (23 U.S.C. Chapter 4).

The agency has directed energies toward reaching high-risk populations including youth. The Governor of each State has appointed a youth coordinator to work with school and other officials to reach young people. Alcohol and occupant protection are the prime subject areas covered. The "70% PLUS Honor Roll" has prompted high schools to work toward achieving a minimum of 70% belt use.

Networking with public health and education groups at **the** national level has been a prime focus of the agency. A National Seat **Belt** Coalition has been formed and groups working with young people in all areas **are** being asked to join and to reach out with belt messages.

Schools play a pivotal role in youth traffic safety, for they are the settings in which most youth receive driver and traffic safety education. Youngsters ate receptive to information, and experience dictates that they are also excellent delivers of safety messages, **NHTSA's** student programs emphasize not only school-based activities, but extracurricular, community, and parent activities as well. NHTSA also has a cooperative **agreement** with the National Safe Kids Campaign. Its coalitions work with a variety of populations, some of which ate in school settings.

The agency's current and anticipated priorities will center on the Presidential goal for the agency of reaching 70% belt use by 1992.

Materials

- Sudden Impact: An Occupant Protection Faa Book (curriculum manual for high school, adults)
- Vince and Larry on Be&s and Bags (pamphlet for junior high/high school, adults)
- National Awards Program—Safety Belt Use (pamphlet for high schools, adults)
- How to Plan a Comprehensive Community Protection Program (manual)
- Vince and Larry Game (poster for elementary grades)
- The Car Club (curriculum kit for middle/junior high school)
- Taking the **Lead Student Leaders** Manual (curriculum for high school)
- Taking the Lead Facilitator's **Guide** (curriculum guide for video)
- Taking the Lead (video 1/2" VHS)
- **Safer** Way for **Everyday** (curriculum kit for K-3)
- Safety **Belt** Activity **Guide** (curriculum kit for K-6)

Available **from:** See program contact listed below.

For additional information, contact:

Rita S. Weiss, MA
National Highway Transportation Safety Administration
Mail Code NRO 01
Room 5238
400 7th St., SW
Washington, DC **20590**

Phone: **202/366-2** 12 1

Pedestrian and Bicycle Safety Programs

Areas of Emphasis

 Health Education Curricula

Information

Program strategies, approaches, media

Subject Matter:
Injuries/safety (traffic safety)

- School as a Healthy Environment Safety
- School and Community Health Promotion

Target Groups

• Students Preschool

Elementary

Parents

Program Profile

In 1989, approximately 20% of children aged O-17 killed in motor vehicle crashes were either pedestrians or bicyclists.

The goal of NHTSA's pedestrian and bicycle safety programs is to reduce injury and fatalities associated with motor vehicle crashes involving pedestrians and bicyclists. Of particular concern are children aged 5-9. Education, skills training, role modeling by parents, and use of approved bicycle safety helmets are key factors in reducing these fatalities. All these traffic safety programs come under the authority of the Highway Safety Act of 1966, as amended (23 U.S.C. Chapter 4).

In the late 1970's, the "Willy Whistle" videos and teachers' guides were developed and found effective in reducing the incidence of pedestrian crashes among 5-12 year olds. The "Walk in Traffic Safely" and "Children Riding on Sidewalks Safely" were developed by the National Association for the Education of Young Children (NAEYC) through a grant from NHTSA as curriculum for preschool children. Pedestrian and bicycle safety flyers were developed in conjunction with other organizations to help parents and teachers promote pedestrian and bicycle safety for children.

The previously mentioned Willy Whistle materials are being revised to reflect a more modern appearance. A mini bicycle safety curriculum is under development for use in upper elementary school classrooms. Program

planning materials and program implementation grants are available to communities to implement pedestrian safety programs. Many of these programs have school-based education activities as major program components. Liaisons with other organizations such as the National SAFE KIDS Campaign and the U.S. Consumer Product Safety Commission will continued.

Schools play a pivotal role in youth traffic safety, for they are the settings in which most youth receive driver and traffic safety education. Youngsters are receptive to information, and experience dictates that they are also excellent deliverers of safety messages. NHTSA's student programs emphasize not only school-based activities, but extracurricular, community, and parent activities as well. Schools have played an important role in teaching children-particularly elementary school-age children-about bicycle and pedestrian safety. Through a combination of classroom and practical training, students enhance their knowledge and skills to help them avoid crashes as pedestrians and bicyclists.

Materials

- Walk in Traffic Safely
- Children Riding on Sidewalks Safely

Available from: The National Association of the Education of Young Children, 1834 Connecticut Ave., NW, Washington, DC 20009

- Willy Whistle (video and curricula for ages 5-8 years and 9-12 years)
- Prevent Pedestrian Accidents (flyer)
- Prevent Bicyck Accidents (flyer)
- A Bicycle Safety Message for Parents, Teachers, Motorists (flyer)
- Safe Street Crossing For **Kids** (Program **Planning Guide**)
- Biking to School (mini-bike safety curriculum)

Available from: See program contact listed below.

For additional information, contact:

National Highway Traffic Safety Administration NTS-23 400 7th St., SW Washington, DC 20590 202/366-2761

Asbestos in Schools

Areas of Emphasis

• School as a Healthy Environment Asbestos abatement

Target Groups

Students
Elementary

Middle school/junior high

High school

- Parents
- Faculty and Staff
- . commurlity

Program Profile

In October 1986, Congress passed the Asbestos **Hazard** Emergency Response Act **(AHERA)** which required all 45,000 of the nation's public and private, primary and secondary schools to:

- Inspect their buildings for all asbestos-containing materials
- Develop management plans to control exposure to these materials
- Select and implement "response" or control actions, ranging from in-place management to removal, as appropriate
- Take each of these actions-inspections, management planning and response action-with specially trained and accredited personnel
- Provide proper awareness and worker training, as well as notification to workers and parents.

Since 1985, EPA has awarded \$291.5 million to schools nationwide to assist with asbestos abatement. The Asbestos School **Hazard** Abatement Act (ASHAA) program distributes funds based on financial **need** and **hazard**. Each annual award cycle is determined by congressional appropriation.

To receive further information on asbestos in schools, contact the EPA asbestos hotline, 202/554-1404.

Materials

- Environmental Hazards in Your School: A Resource Handbook (October 1990)
- The ABCs of Asbestos in Schools (June 1989)
- Managing Asbestos in Place (July 1990)

- Answers to the Mast Frequently Asked Questions About Reinspection (May 1991)
- 100 Commonly Asked Questions About the AHERA Asbestos-in-Schools Rule (May 1988)
- Asbestos-in-Schools: A Guide to New Federal Requirements for Local Education Agencies (February 1988)

Available from: EPA Asbestos Hotline, 202/554-1404

For additional information, contact:

Diane Sheridan Acting Chief, Abatement Programs Section Environmental Protection Agency 401 M St., SW Washington, DC 20460 Phone: **202/260-3790**

School and Day Care Pilot Project

Areas of Emphasis

 Health Education Information

Subject Matter: Injuries/safety

- School as a Healthy Environment Safety
- School and Community Health Promotion

Target Groups

• Students Preschool

Elementary

Middle school/junior high

• Parents

Program Profile

The purpose of the Consumer Product Safety Commission (CPSC) pilot project for school/daycare safety is to determine the feasibility of developing communication channels to and through elementary schools and child care centers to reach school administrators, children, and families with important safety information about school and home environments.

As a pilot project in FY92, CPSC will conduct the following activities: (1) select jurisdictions to participate in the pilot; (2) initiate communication channels to determine course of action and tools to implement the pilot objectives; (3) initiate a dialogue with national organizations that network with schools and child care constituencies to determine the best means of building communication channels; and (4) monitor the program and prepare recommendations.

Materials

Handbook for Playground Safety

Available from: See program contact listed below.

For additional information, contact:

Elaine Tyrrell

Agency Spokesperson/Children's Hazards U.S. Consumer Product Safety Commission Washington, DC 20207 Phone: **301/504-0580**

National Health/Education Consortium

Areas of Emphasis

Policy Development; coordination of health and education services

Target Groups

• Policy Developers at the national, State, and community levels

Program Profile

In response to the growing awareness of the connection between children's health and their ability to learn, the National Health/Education Consortium has been formed.

The project, convened by the National Commission to Prevent Infant Mortality and the Institute for Educational Leadership, has brought together leaders from 50 national health and education membership organizations, representing a collective constituency of more than 12 million members. The objective is to design strategies to more effectively integrate health and education services and programs for children in this country.

The National Health/Education Consortium maintains that children must be healthy to be able to learn, and they must be educated to keep themselves healthy. Millions of infants and children, however, lack access to health care or suffer from poor health, leaving them vulnerable to physical and learning disabilities and other long-term problems such as illiteracy, dropping out of school, and juvenile incarceration. Coordination of health and education services for children can enhance their ability to learn, succeed in school and become productive members of society.

Promoting the full potential of children and providing them with the best opportunities for success will require changes in the systems which currently provide health and education services. Reforms in these systems are needed to consolidate programs, unify agencies and funding streams, and provide a more comprehensive approach to children's programs.

Activities of the National Health/Education Consortium include: developing strategies to influence public policies which govern health and education in an effort to promote closer working relationships and collaborative programs between the two systems throughout the country; identifying model programs that successfully link health and education; organizing local, State, regional, and national conferences to generate dialogue and promote coordii action among health professionals, educators, business, advocates, and policymakers; publishing and disseminating papers on selected topics such as health education in schools, neurological precursors to learning, cultural and diversity issues in linking health and education, successful models of interagency coordination, and others; seeking out leaders in business, public policy, health, education, the media, and others for comment and involvement in the Consortium Action Plan.

Materials

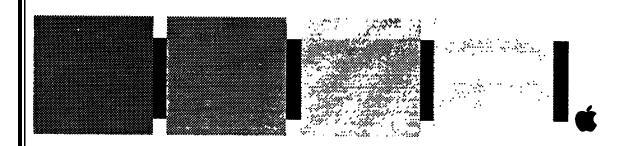
- Crossing the Boundaries Between Health and Education
- Healthy Brain Development: Precursor to Learning
- A Practioner's Perspective on the Interrelationship of the Health and Education of Children
- The Health and Education Primer: A Guide to Understanding How Our Health and Education Systems Work (in press)

Available from: The National Commission to Prevent Infant Mortality, 202/472-1364

For additional information, contact:

Rae Grad

Executive Director
The National Commission to Prevent Infant Mortality
Switzer Building
330 C St., SW, Room 2014
Washington, DC 20201
Phone: 202/205-8364



PART 2

CLEARINGHOUSES AND INFORMATION CENTERS

Food and Nutrition Information Center

Areas of Emphasis

Health Education

Curricula Information

Subject **Matter:**

Cardiovascular health Nutrition Dental health

Physical fitness

• Nutrition/Healthy School Food Services

• Worksite Health Promotion for Faculty and Staff

Target Groups

Students

Preschool Elementary Middle school/junior high

High school Students with special needs/ special education

• Parents

Faculty and Staff

• Out-of-School, High-Risk Youth

. community

Program Profile

The Food and Nutrition Information Center (FNIC) services persons seeking information or educational materials in the area of food and human nutrition. The center is part of the National Agricultural Library (NAL).

FNIC serves many kinds of users, for example, it can help school teachers implement effective nutrition programs. The center acquires books, journal articles, and audiovisual materials pertaining to human nutrition, food service management, and food science. The audiovisual collection covers a variety of media including motion pictures, film strips, slides, videocassettes, and posters. The center's collection ranges from children's materials to sophisticated technical information.

Topics include the relationship between diet and disease; nutrient composition; food science and technology; food service management; food safety and sanitation; U.S. food and nutrition programs; and nutrition education.

FNIC lends books and audiovisual materials, provides photocopies of journal articles, and provides comprehensive reference services, including computer searches of major data bases.

Direct free borrowing privileges and/or unlimited free reference service is available for the staff of school districts and elementary and secondary school personnel (including teachers, food service staff, and school nurses).

To provide printed listings of the center's holdings, FNIC has developed the following materials:

- Comprehensive catalogs
- Subject-specific bibliographies
- Brief reading lists called PATHFINDERS

Users can visit the center personally, write or telephone, or have a local library make interlibrary loan requests,

Materials

- Nutrition Printed Materials and Audiovisuals: Grades Pre.dwol-6 (Quick Bibliography Services QB90-81)
- Sports Nutrition (Nutri-Topics)
- Children's Literature on Food and Nutrition (PATHFINDER)

For materials or additional information, contact:

Food and Nutrition Information Center National Agricultural Library, Room 304 10301 Baltimore Blvd. Beltsville, MD 20705

Phone: 301/504-5719

or

Sandra L. Facinoli Coordinator, Food and Nutrition Information Center Room 304, **NAL** Building 10301 Baltimore Blvd. Beltsville, MD 20705-235 1

Phone: 301/504-5719 Fax: 301/504-5472

Rural Information Center

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Program strategies, approaches, media

Subject Matter:

Comprehensive health Alcohol or other drugs Violence/conflict resolution

education

Injuries/safety Environment Nutrition
Tobacco Life skills Family life
HIV/AIDS Physical fitness

Health Services

Immunizations School nursing Screening

Counseling/mental health School-based health services

• School as a Healthy Environment

Safety Asbestos abatement Drinking water lead

• Nutrition/Healthy School Food Services

- Physical Education/Fitness/Sports/Recreation
- Worksite Health Proinction for Faculty and Staff
- School and Community Health Promotion

Target Groups

- Parents
- Faculty and Staff
- . community

Program Profile

The Rural Information Center Health Service (RICHS) is part of the Rural Information Center (RIC) at the National Agricultural Library (NAL) located in Beltsville, Maryland. NAL and the Office of Rural Health Policy in the Department of Health and Human Services jointly created RICHS as a rural health information service. RICHS is designed to collect and disseminate information on rural health issues, research findings relating to rural health, and innovative approaches to the delivery of rural health care services.

Primary users of the information center include Federal agencies, the public, and professionals.

RIC staff will:

- Assist the user in locating a variety of information sources to meet individual needs.
- Refer the user to organizations or experts in the field who can provide additional information.
- Perform brief, complimentary literature searches of computerized data bases on requested topics, or exhaustive searches on a cost recovery basis.
- Furnish copies of RIC bibliographies and publications.

For materials or additional information, contact:

Rural Information Center National Agricultural Library, Room 304 Beltsville, MD 20705-235 1

Phone: 800/633-7701 or 301/504-5547

Fax: 301/504-5181

Phone: 301/504-5372

or

Patricia L. John Coordinator Rural Information Center National Agricultural Library, Room 304 Beltsville, MD 20705-235 1

Youth Development Information Center

Areas of Emphasis

• Youth At Risk Programs and Initiatives

Target Groups

• Youth Workers

Program Profile

The Youth Development Information Center is a joint project of the Extension Service and the National Agricultural Library (NAL). The center provides information services to youth development professionals who plan, develop, implement, and evaluate programs designed to meet the changing needs of America's youth. It combines the technical, subject-matter expertise of the extension's nationwide education network with the information specialists and resources of the world's foremost agricultural library. The center maintains a national collection of books, journal articles, dissertations, theses, reports, curricula, and other resources relevant to youth development. All items are identified and reviewed by youth development professionals before being added to the collection.

Primary users of the information center include United States Department of Agriculture Extension Service personnel and youth and family development professionals.

Materials

• The center can provide bibliographies in several **areas** for youth professionals such as communication, education design, youth development, youth program management, volunteerism, or another specific topic related to youth. Brief complimentary literature searches of computerized data bases on a requested specific topic or exhaustive search in a cost recovery **basis** are available.

For materials or additional information, contact:

Youth Development Information Center 10301 Baltimore Blvd., Room 304 Beltsville, MD 20705

Phone: 301/504-5719 Fax: 301/504-5472

Phone: 301/504-5719

Computer access: Agricultural Library Forum (ALF)

301/344-8510

or

John Kane Coordinator NAL, Youth Development Information Center 10301 Baltimore Blvd., Room 304 Beltsville, MD 20705

236-Healthy Schools

Tobacco

Military Family Clearinghouse

Areas of Emphasis

Health Education

Curricula Information

Subject Matter:

Alcohol or other drugs Violence/conflict resolution

Life shills Family life

Target Groups

Service Providers For Military Members and Families

Program Profile

The Department of Defense Family Advocacy Program focuses on the elimination of family violence and the facilitation of effective family functioning. The Military Family Clearinghouse is the most comprehensive collection of pertinent information available to service providers and military families. The Military Family Clearinghouse maintains two. information collections that cover 40 categories of military issues. It provides **annotated** bibliographies of each of the categories. The Military Family Clearinghouse contains model programs, training curricula, film abstracts, professional journal articles, popular **magazine** and **newspaper** articles, and other material from both civilian and military sources appropriate for designing, maintaining, or expanding programs and activities. The Military Family Clearinghouse contains military reports, **dissertations**, **technical reports**, and other written materials pertinent to military life.

For materials or additional information, contact:

Military Family Clearinghouse 4015 Wilson Blvd., Suite 903 Arlington, VA 22203-5190

Phone: 703/696-5806 or 800/336-4592

Fax: 703/696-6344

National Rehabilitation Information Center

Areas of Emphasis

Health Education

Information

Subject **Matter:**

Alcohol or other drugs Injuries/safety HIV/AIDS **Cardiovascular** health Nutrition

Nutrition Physical fitness Injuries/safety Cancer

• Health Services

Counseling/mental health

- Nutrition/Healthy School Food Services
- Physical Education/Fitness/Sports/Recreation

Target Groups

Students

Middle school/junior high

High school

Students with special needs/ special education

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community

Program Profile

The National Rehabilitation Information Center **(NARIC)** was established by the National Institute on Disability and Rehabilitation Research **(NIDRR)** to be a library and data base on all aspects of disability and rehabilitation. Materials include journal articles, research reports, monographs, policy studies, audio visuals, and **pamphlets.**

Primary users of the information center include Federal agencies, the public, professionals, and others interested in disability or rehabilitation issues.



For materials or additional information, contact:

National Rehabilitation Information Center 8455 **Colesville** Rd. suite 935

Silver Spring, MD 20910-3319

Phone: 800/346-2742 or 301/588-9284

Fax: 301/587-1967

or

James Doherty Writer/Editor Department of Education 400 Maryland Ave., SW Room 3423, MES Washington, DC 20202-2646 Phone: **202/732-615** 1

Educational Resources Information Center Clearinghouse on Teacher Education

Areas of Emphasis

• Health Education

curricula Information Personnel training

Program strategies, approaches, media

Subject **Matter**:

Comprehensive health Alcohol or other drugs Cardiovascular health

education

Violence/conflictresolutionInjuries/safetyEnvironmentNutritionTobaccoCancerDental healthLife skillsFamily life

HIV/AIDS Physical fitness

• Health Services

screening School-based health services

• School as a Healthy Environment Safety

- Physical Education/Fitness/Sports/Recreation
- Worksite Health Promotion for Faculty and Staff
- School and Community 'Health Promotion

Target Groups

Students

Preschool Elementary Middle school/junior high

High school Students with special needs/special education

Parents

- Faculty and Staff
- Out-of-School, High-Risk Youth
- . conuuunity

Program Profile

The Educational Resources Information Center (ERIC) is a nationwide information network established in 1966 to make educational research and practice available from a single source. The ERIC system, managed by the U.S. Department of Education's Office of Educational Research and Improvement, consists of 16 subject-area clearinghouses and support components. The topic areas of health, physical education, recreation, and dance are covered by the Clearinghouse on Teacher Education.

ERIC is the largest education data base in the world, containing nearly 700,000 bibliographic records of documents and journal articles. Papers, conference proceedings, literature reviews, health and physical education curriculum materials, and articles from the leading health education journals are indexed and abstracted for entry into the data base. The full text of most documents is available in microfiche or paper copy from the ERIC Document Reproduction Service.

The ERIC Clearinghouse on Teacher Education is sponsored by the American Association of Colleges for Teacher Education (AACTE).

Materials

- Young **Children** on the Grow: **Health**, Activity, and Education in the **Preschool** Setting (monograph; \$20.00)
- Drug and Alcohol Prevention Education (Digest; free)
- Childhood Obesity (Digest; free)
- Exercise Adherence (Digest; free)
- Adolescents and AIDS (Digest; free)
- Credentialing in the Health, Leisure, and Movement Professions (Trends and Issues paper)

For materials or additional information, contact:

Mary Dilworth
Director
ERIC Clearinghouse on Teacher Education
AACTE
One Dupont Circle Suite 610

One Dupont Circle, Suite 610 Washington, DC 20036-2412

Phone: 202/293-2450 Fax: 202/457-8095

National Information Center for **Children** and Youth with **Disabilities**

Areas of Emphasis

• Health Education

Information

Subject Matter:

Alcohol or other drugs

Nutrition **HIV/AIDS**

Life skills

Family life

Health Services

Counseling/mental he&h

School-based health services

- Nutrition/Healthy School Food Services
- Physical Education/Fitness/Sports/Recreation

Target Groups

• Students

Preschool High school Elementary Students with special needs/special education Middle school/junior high

Parents

Program Profile

This information center has been operating for over 20 years, first as "Closer Look," then as the National Information Center for Children and Youth With Disabilities (NICHCY). NICHCY responds to requests for information on all disabilities and related issues. NICHCY operates through the Clearinghouse for the Handicapped programs authorized by Section 633 of Part D of the Education of Individuals with Disabilities Act (20 U.S.C.) as amended by P.L. 99-457 and P.L. 101-476.

NICHCY is funded by the Office of Special Education Programs. NICHCY staff respond to questions and produce publications and other materials on issues and current topics.

Materials

• A list of materials will be available by contacting NICHCY.

For materials or additional information, contact:

NICHCY Box 1492 Washington, DC **20013**

Phone: **800/999-5599** or **703/893-6061** Computer access: **SpecialNET (NICHCY)**

or

Carol Valdevieso, **PhD** Director, NICHCY 7926 Jones Branch Dr. McLean, VA 22102 Phone: **703/893-6061**

National Clearinghouse for Primary Care Information

Areas of Emphasis

• Health Services

Target Groups

community

Program Profile

The National Clearinghouse for Primary Care Information (NCPCI) is designed to assist administrators and practitioners in accessing information and obtaining materials that will support the delivery of high quality health care at the community level. Publications distributed by NCPCI include manuals, haodbooks, and resource guides that will be of special interest to professionals working in primary care centers funded by the Bureau of Health Care Delivery and Assistance (BHCDA). All publications are available free of charge.

Primary users of the clearinghouse include Federally funded community and migrant health centers; State primary care offices; central and regional offices of the Department of Health and Human Services; and the general public.

Materials

 A publications list is available by writing or calling the National Clearinghouse for Primary Care Information

National Clearinghouse for Primary Care **Information** 8201 Greensboro Dr., Suite 600 McLean, VA 22102

Phone: **703/82** 1-8955 Fax: **703/506-0384**

or

Judy A. Cramer Project Director 8201 Greensboro Dr., Suite **600** McLean, VA 22102

Phone: **703/821-8955** Fax: **703/506-0384**

Combined Health Information Database

Areas of Emphasis

Health Education

Curricula Information Program strategies, approaches,

media

Subject Matter:

Comprehensive health Alcohol or other drugs Cardiovascular health

education

Injuries/safetyEnvironmentNutritionTobaccoCancerDental healthLife skillsFamily lifePhysical fitness

• Health Services

School nursing School-based health services

 School as a Healthy Environment Safety

- Nutrition/Healthy School Food Services
- Physical Education/Fitness/Sports/Recreation
- Worksite Health Promotion for Faculty and Staff
- School and Community Health Promotion

Target Groups

• Students
Elementary

Middle school/junior high

High school

- Faculty and Staff
- Out-of-School, High-Risk Youth
- community

Program Profile

The Combined Health Information Database (CHID) is a computerized bibliographic data base of health information and health education/health promotion resources developed and managed by the U.S. Public Health Service. At present, there are 17 subfiles on CHID with more than 60,000 abstracted items. Examples of CHID subfiles include AIDS Education, AIDS School Health Education, and Health Promotion and Education.

The Health Promotion and Education data base contains more than 19,000 entries describing health promotion/health education information including school health education, family life and sex education, and worksite health promotion and education.

The AIDS School Health Education **Subfile** contains 765 records, including programs, curricula, guidelines, policies, regulations, and materials (some records are full text). The **intended** audience is education and health professionals.

CHID is a unique reference service for all health professionals-physicians, nurses, health educators, etc.-who need to locate health information. The data base provides bibliographic citations for major health journals, books, reports, pamphlets, audiovisuals, hard-to-find information sources, and health education/health promotion programs underway in State and local health departments and other locations. In addition, CHID provides source and availability information for these materials, so that users may obtain them directly.

Materials

• The Health Promotion and Education Subfile contains abstracts describing journal articles, books, book chapters, manuals, program descriptions, teaching guides, reports, and papers related to school health. Data base records list resources where items may be obtained.

For materials or additional information, contact:

Centers for Disease Control Center *for Chronic* Disease Prevention and Health Promotion Technical Information Services Branch 1600 Clifton Rd., *Mailstop* K-13 Atlanta, GA 30333

Phone: **404/488-5080**Fax: **404/488-5969**

Computer access: BRS Information Technologies

National AIDS Clearinghouse

Areas of Emphasis

Health Education

Curricula Information Personnel training
Program strategies Educational materials

Program strategies, approaches, media

Subject Matter:

Alcohol or other drugs HIV/AIDS

• Health Services

School nursing Counseling/mental health School-based health services

Worksite Health Promotion for Faculty and Staff

• School and Community Health Promotion

Target Groups

Students

Preschool Elementary Middle school/junior high

High school Students with special needs/special education

Parents

Faculty and Staff

• Out-of-School, High-Risk Youth

. community

Program Profile

The National AIDS Clearinghouse was established by the Centers for Disease Control National AIDS Information **and** Education Program in October 1987 to provide HIV/AIDS reference, referral, and publications distribution services to health care **and** other professionals who work **in** a variety of **settings** such as State AIDS programs, **community-based** organizations, AIDS service organizations, businesses, schools, **and** associations and who have a need for accurate HIV/AIDS education and prevention information.

The **clearinghouse** acquires, organizes, reviews, updates, and distributes HIV/AIDS prevention and education information. This information is synthesized and **entered into** three online data bases developed and maintained by the National AIDS Clearinghouse: Resources and Services, Educational Materials, and Funding Databases. Additionally, **reference** specialists have direct access to the AIDS School Health Education Database developed

and produced by the Centers for Disease Control's Center for Chronic Disease Prevention and Health Pronotion. Clearinghouse reference specialists use these information data bases to respond to caller's needs to identify and locate educational materials, organizations, and funding source8 for specific audience6 and locations. Through the National AIDS Clearinghouses one can:

- Identify organizations—clinics, hospitals, extended-care facilities, public health departments, commercial enterprises, community-based organizations, and religious groups-which offer HIV/AIDS-related services.
- Locate hard-to-find educational materials-brochures, pamphlets, State reports, posters, and audiovisuals-and find out how to obtain copies.
- Locate teaching guides, curricula, and other resources for educators to use to teach children and youth about HIV infection and AIDS.
- Identify the latest HIV-related news, statistics, upcoming events and Centers for Disease Control reports and policy statements through the electronic bulletin board.
- Order multiple or single copies of HIV and AIDS information publications, America Responds to AIDS (ARTA) media campaign materials, and selected video-.
- Receive personal&d assistance from bilingual information specialists who speak English, Spanish, and French.

Materials

- AIDS Prevention Guide (Information packet. Also available in Spanish)
- How You Won't Get AIDS (4 color posters for youth)
- Catalog of HIV/AIDS Materials for Professionals
- Guidelines for Effective School Health Education to Prevent the Spread of AWS
 American Responds to AIDS Materials Catalog (posters and brochures)

For materials or additional information, contact:

National AIDS Clearinghouse **P.O. Box** 6003 **Rockville,** MD 20849-6003

Phone: 800/458-5231 or 301/738-6616

Fax: 301/738-6616

or

Pomeroy Sinnock, **PhD**Project Officer, National AIDS Clearinghouse
Centers for Disease Control
1600 Clifton Rd., NE, MS-E-25
Atlanta, GA 30333

Phone: 404/639-2928 FTS: 404/236-2928

Food and Drug Administration Communications Staff

Areas of Emphasis

. Health Education

Curricula Information

Subject Matter:

Comprehensive health Alcohol or other drugs Nutrition

education

Cancer Dental health HIV/AIDS

• Health Services Immunizations

Nutrition/Healthy School Food Services

Target Groups

Students

Middle school/junior high High school

Parents

• Faculty and Staff

Program Profile

Materials available from the Food and Drug Administration (FDA) Communications Staff serve the broad agency objectives of educating consumers and food and drug officials about FDA policies and regulatory actions that affect the public health and about the safe use of products regulated by FDA. They are also an integral part of FDA's disease prevention and health promotion program in that it is often at the forefront of important public health issues like food safety, AIDS, and quackery. Statutory authority for FDA printed materials is contained in the Federal Food, Drug, and Cosmetic Act, 52 Stat. 1040, Section 705 (Section 375 of the U.S. Code, Title 21). The various information available is on foods, drugs, cosmetics, veterinary medicine, medical devices, and radiological health. The materials available would be valuable research tools for any student interested in the topics mentioned in the previous sentence.

Primary users of these materials include the general public, health professionals, libraries, schools, collegea, Federal agencies, and State and local agencies.

Materials

- Acne: Taming That Old-Age Adolescent Affliction (reprint)
- Childhood Vaccines: A Responsibility to Remember (reprint)
- Keeping up **With the** Microwave Revolution (reprint)
- Have You Read any Good Labels Lately? (exhibit)
- Food Safety Series (video news release)
- Food for Thought (slide show/video)
- Eating Disorders: When Thinness Becomes an Obsession (report)
- From **Test** Tube to Patient: **New** Drug Development in the U.S. (booklet)
- Anabolic Steroids: Losing at Winning (brochure, video news release)
- A Story About Brian (poster on Reye Syndrome)
- On Yeast Infections and Other Female Irritations (reprint)
- Condoms and Sexually Transmitted Disease... Especially AIDS (brochure)

For materials or additional information, contact:

Michael Herndon
Publications Officer
Food and Drug Administration/HFI-40
5600 Fishers Lane, Room 15A-19
Rockville, MD 20857

Phone: 301/443-3220

National Center for Education in Maternal and Child Health

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Program strategies, approaches, media

Subject Matter:

Comprehensive health Alcohol or other drugs Violence/conflict resolution

education

Injuries/safetyDental healthLife skillsNutritionHIV/AIDSFamily life

Health Services

Immunizations School nursing Screening

Counseling/mental health School-bawl health services

• School as a Healthy Environment

Safety Drinking water lead

• Nutrition/Healthy School Food Services

• Physical Education/Fitness/Sports/Recreation

• Worksite Health Promotion for Faculty and Staff

• School and Community Health Promotion

Target Groups

• Students

Preschool Elementary Middle school/junior high

High school Students with special needs/

special education

Parents

• Faculty and Staf'f

• Out-of-School, High-Risk Youth

. community

Program Profile

The National Center for Education in Maternal and Child Health (NCEMCH) provides information and educational services, as well as technical assistance, to organizations, agencies, and individuals with maternal and child health interests. NCEMCH began as a genetics clearinghouse in 1982 and is funded by the Maternal and Child Health Bureau, U.S. Department of Health and Human Services. The center responds to information requests, maintains a reference collection of Maternal and Child Health program materials, develops publications on maternal and child health topics, and provides technical assistance in educational resource development, program planning, and topical research. Materials include books, reports, pamphlets, government publications, patient education materials, newsletters, and information about 1,400 organizations that offer in-depth information on specific topics. Among its staff of subject specialists is an adolescent health specialist who can provide customized information and assistance on the topic of school health.

Materials

• Maternal and Child Health Publications Catalog

For materials or additional information, contact:

NCEMCH 2000 15th St., North, Suite 701 Arlington, VA 22201-2617 Phone: 703/524-7802

or

Olivia **Pickett**Librarian
NCEMCH
2000 15th St., North, Suite 701
Arlington, VA **22201-2617**Phone: **703/524-9335**

National Maternal and Child Health Clearinghouse

Areas of Emphasis

• Health Education Information

Subject Matter: Injuries/safety

Nutrition

Dental health

Health Services

Immunizations Counseling/mental health

School as a Healthy Environment

Environmental lead poisoning prevention

Information

Target Groups

Students

Middle school/junior high

High school

student8 with special needs/ special education

community

Program Profile

The mission of the clearinghouse is to facilitate the transfer of information from research in the field of maternal and child health to policymakers, program planners, and health care professionals in order to maintain and to improve the health of mothers and children. The clearinghouse accomplishes this mission by serving as a repository and distributor of state-of-the-art information materials developed or funded by the Maternal and Child Health Bureau. Most materials are distributed at no cost to the recipient and include monographs, books, booklets, pamphlets, posters, and a limited number of videotaped materials.

Materials

- Adolescent Fathers-Directory of Services
- Adolescent Health Abstracts **of** Active Projects
- Adolescent Health Catalog of Products
- Bridging Ethnocultural Diversities in Social Work and Health

- Building Systems of Care for Children With HIV Infection and Their Families
- Caution: Adolescents at Risk (videotape)
- Violence and Unintentional Injury Prevention Abstracts of Active Projects
- Your Child from One to Six (in press)
- Healthy Foods, Healthy Baby
- Nutrition and Your Health-Dietary Guidelines for Americans
- Starting Early: A Guide to Federal Resources in Maternal and Child Health

NMCHC 8201 Greensboro Dr. Suite 600 McLean, VA 22102

Phone: 703/821-8955 ext. 254

or

Linda Cramer Project Director 8201 Greensboro Dr. Suite 600 McLean, VA 22102

Phone: **703/82** 1-8955 ext. 254

Fax: 703/506-0384

National SIDS Clearinghouse

Areas of Emphasis

• Health Education Information

Subject Matter:
Death/bereavement

• Health Services Counseling/mental health

Target Groups

• Students Preschool

Elementary

Middle school/junior high

- Parents
- community

Program Profile

The National SIDS Clearinghouse is a service provided by the Department of Health and Human Services, Maternal and Child Health Bureau. The clearinghouse provides information and resource8 on sudden infant death syndrome, apnea, grief, bereavement support, and related issues. Information useful to schools primarily addresses children and grief or sudden loss.

Materials

- Caring About Kids: Talking to Children About Death
- Fact Sheet: What Is SIDS?

National SIDS Clearinghouse 8201 Greensboro Dr., Suite 600 McLean, VA 22102

Phone: 703/821-8955 Fax: 703/506-0384

Cancer Information Service

Areas of Emphasis

Health Education

Information

Program strategies, approaches, media

Subject Matter: Cancer

Nutrition/Healthy School Food Services

Target Groups

Students

Middle school/junior high

High school

- Parents
- Faculty and Staff

Program Profile

The National Cancer Institute provides approximately 400 cancer-oriented publications, free of charge. Some publications are limited in supply; others are not.

Anyone can call the toll-free number for information related to cancer, Monday through Friday, 9-5.

Materials

- Chew or Snuff ls Read Bad Stuff (brochures, designed for seventh' and eighth graders, describes the health and social effects of using smokeless tobacco products)
- Help Yourself: Tips for Teenagers with Cancer (booklet)
- When Someone in Your Family Has Cancer (booklet written for young people whose parent or sibling has cancer)
- Young People with Cancer: A Handbook for Parents (booklet)
- *Understanding the Immune System* (pamphlet)
- Asbestos Exposure: What It Means, What To Do (pamphlet)

Cancer Information Service Phone: **800/4CANCER**

or

Chris **Thomsen**Chief, Public Inquiries Section
National Cancer Institute
Building 31, **10A16**9000 **Rockville** Pike
Bethesda, MD

Phone: 301/496-5583

National Eye Institute Information Office

Areas of Emphasis

. Health Education Information

Subject Matter: **Eye** health

Target Groups

Community

Program Profile

The National Eye Institute is the Federal government's principal agency for supporting and conducting research on the diagnosis, treatment, prevention, and rehabilitation of eye diseases and visual system disorders.

The information office responds to information requests on eye-related topics. Information is provided directly and referrals to other agencies and organizations are made, when appropriate.

Primary users of the information office include the public and professionals.

Materials

- Cataracts (pamphlet)
- Age-Related Macular Degeneration (pamphlet)
- Diabetic Retinopathy (also available in Spanish)
- Glaucoma
- Other fact sheets and resource lists are in process

National Eye Institute Information Office Kym Collins-Lee Public Inquiries Coordinator Building 31, Room **6A32** 9000 Rockville Pike Bethesda, MD 20892

Phone: 301/496-5248 Fax: 301/402-1065

National Heart, Lung, and Blood Institute Information Center

Areas of Emphasis

Health Education

Information

Program strategies, approaches, media

Subject Matter:

Cardiovascular health

Asthma

Nutrition

Tobacco

Target Groups

• Students
Elementary

Middle school/junior high

High school

- Parents
- Faculty and Staff

Program Profile

The information center is a service offered by the National Heart, Lung, and Blood Institute (NHLBI) of the National Institutes of Health. The information center supports five major educational efforts: the National High Blood Pressure Education Program, the National Cholesterol Education Program, the National Blood Resources Education Program, the National Asthma Education Program, and the NHLBI Smoking Education Program. The information center distributes limited quantities of pamphlets, fact sheets, posters, and other publications produced by NHLBI and other agencies. Subject specialists are also available to respond to public and professional inquiries. The information center contributes its data base on education materials to the Combined Health Information Database (CHID) which is available through BRS, an online vendor.

Primary users of the information center include Federal agencies, the public, health professionals, and consumers.

Materials

- School-based Opportunities for Tobacco Use Intervention (booklet)
- National Cholesterol Education Program: Highlights of the Report of the Expert Panel on Blood Cholesterol Levels in Children and Adolescents (pamphlet)

For materials or additional information, contact:

Information Specialist NHLBI Information Center 4733 Bethesda Ave. Suite 530 Bethesda, MD 20814-4820

Phone: **301/951-3260** Fax: **301/95** 1-3269

National Arthritis and Musculoskeletal and Skin Diseases Information Clearinghouse

Areas of Emphasis

. Health Education Information

Subject Matter: Injuries/safety

- Physical Education/Fitness/Sports/Recreation
- Worksite Health Promotion for Faculty and Staff
- School and Community Health Promotion

Target Groups

• Students
Middle school/junior high

High school

Students with special needs/ special education

- Parents
- Faculty and Staff
- . community

Program Profile

The National Arthritis and Musculoskeletal and Skin Diseases Information Clearinghouse (NAMSIC) is a national resource center for information about professional, patient, and public education materials, community demonstration programs, and Federal programs related to rheumatic, musculoskeletal, and skin diseases. The clearinghouse is a program of the National Institutes of Health.

Primary users of the clearinghouse include the public and professionals.

NAMSIC Box **AMS** 900 Rockville Pike Bethesda, MD 20892 Phone: **301/495-4484** Fax: **301/587-4352**

or

Gail Bassin
Project Director
8737 Colesville Rd.
Suite 800
Silver Spring, MD 20910

National Institute of Child Health and Human Development **Office** of Research Reporting

Areas of Emphasis

 Health Education Information

Subject **Matter**:

Alcohol or other drugs Nutrition

Family Life

Violence/conflict resolution

HIV/AIDS

Tobacco

Injuries/safety Life skills

• School and Community Health Promotion

Target Groups

Students

Middle school/junior high

High school

Students with special needs/ special education

- Parents
- Faculty and Staff
- Community

Program Profile

The National Institute of Child Health and Human Development (NICHD) conducts and supports research on maternal and child health. A number of pamphlets and other publications produced by the institute provide information on health topics that may be of use in a school health program.

Ms. **Michaela** Richardson
Public Information Officer **NICHD** Office of Research Reporting
Building 3 1, Room **2A32**National Institutes of Health
9000 Rockville Pike
Bethesda, MD 20892

Phone: **301/496-5** 133

Alzheimer's Disease Education and Referral Center

Areas of Emphasis

• Health Education Information

Subject Matter:
Alzheimer's disease

Target Groups

- Students High school
- Faculty and Staff
- community

Program Profile

The Alzheimer's Disease Education and Referral (ADEAR) Center was established by the National Institute on Aging as mandated by the Alzheimer's Disease and Related Services Research Act of 1986. The center officially opened in 1990.

The ADEAR Center maintains and disseminates information on current research efforts and findings and distributes publications on a wide variety of topics related to Alzheimer's Disease. The center also maintains an Alzheimer's Disease subfile as part of the Combined Health Information Database (CHID), which is a bibliographic, online data base supported by several agencies of the U.S. Public Health Service. Although most of the materials distributed by the ADEAR Center are targeted to a health professional audience, there are several publications that may also be used in health education efforts at the high-school level. These publications are general in nature and may also be useful for faculty, staff, and the community.

Materials

- Q & A on Alzheimer's Disease
- Age Page: Confusion and Memory Loss in Old Age: It's Not What You Think
- Alzheimer's Disease Fact Sheet

Alzheimer's Disease Education and Referral Center

P.O. Box 8250

Silver Spring, MD **20907-8250** Phone: **301/495-33** 11

or

Emily Johnson Project Director ADEAR Center P.O. Box 8250 Silver Spring, MD **20907-8250** Phone: **301/495-3311**

Fax: 301/587-4352

National Institute on Deafness and Other Communication Disorders Clearinghouse

Areas of Emphasis

• Health Education Information

Subject Matter: Injuries/safety

Healing, balance, smell, **taste**, voice, speech, language

- School as a Healthy Environment Prevention of noise induced hearing loss
- School and Community Health Promotion

Target Groups

• Students
Elementary
Students with special
needs/special education

Middle school/junior high

High school

- Parents
- Out-of-School, High-Risk Youth
- . community

@Health Profession Advocates, Industry, Public

Program Profile

The National Institute on **Deafness** and Other Communication Disorders (**NIDCD**), one of the **thirteen** institutes in the National Institutes of Health established by law, conducts and supports research and research training on **normal** mechanisms as well as diseases and disorders affecting hearing and other communication **processes**, balance, smell, taste, voice, speech, and language. The legislation that established the institute mandated the formation of a national clearinghouse. The objectives of the clearinghouse include: responses to information requests; coordination of the vast **amount** of information tbat already exists in **the** field of communication sciences; distribution to health professionals, patients, industry, and the public; and elimination of duplication

of information by establishing a central resource center that will provide access to current information held by other sources.

Primary users of the clearinghouse include health professionals, patients, industry, and the general public.

Materiais

- Public Education Campaign: Prevention of Noise-Induced Hearing Loss (target audience: 3rd-6th grade)
- Teachers Packet: Teacher's Guide (available in English and Spanish)
- Hearing Loss, Hope Through Research
- Development Speech and Language Disorders, Hope Through Research
- Dizziness, Hope Through Research
- Stuttering, Hope Through Research
- NIDCD Brochure
- NIDCD Clearinghouse Fact Sheet
- Because You Asked About Smell and Taste Disorders

For materials or additional information, contact:

NIDCD Clearinghouse **P.O.** Box 37777 Washington, DC 20013-7777

Phone: **800/241-1044** TDD: **800/241-1055**

or

Patricia Blessing Project Officer **NIH/NIDCD** Building 31, Room **3C35** 9000 Rockville Pike Bethesda, MD 20892

Phone: 301/496-7243

National Diabetes Information Clearinghouse

Areas of Emphasis

Health Education

Information

Subject Matter:

Diabetes

Target Groups

• Students
Elementary

Middle school/junior high

High school

- Parents
- Faculty and Staff
- Community

Program Profile

The National Diabetes Information Clearinghouse **(NDIC)** was established in 1978 to **increase** knowledge and **understanding** about diabetes among patients, health professionals, **and** the public. To carry out this mission, NDIC works closely with the diabetes community, forming a **network** that identifies and responds to informational needs about diabetes and its care.

NDIC responds to requests for information about diabetes and its complications and distributes information appropriate to health professionals, people with diabetes and their families, and the general public. **Responses** span a wide range of topics, from information about available patient education materials to statistical data from the National Diabetes Data Group about **clinical** and epidemiological characteristics of diabetes.

To encourage health professionals and staffs of health organizations to develop highquality educational materials and programs about diabetes, NDIC distributes resource materials for planning and implementing educational programs and evaluating educational materials.

NDIC maintains an automated **file** of brochures, audiovisual materials, books, **articles**, teaching manuals, **factsheets**, and other educational materials on **the** Combined Health Information Database (CHID), described elsewhere in this directory.

Materials

- Topical bibliographies
- Diabetes Dateline (newsletters)
- The Diabetes Dictionary (illustrated glossary of terms)
- Other publications include patient booklets about diabetes, conference proceedings, monographs, reprints, and materials developed by the National Institutes of Health about diabetes research and care.

For materials or additional information, contact:

Beatrice Jakubowski

Information Specialist NDIC
Box NDIC
9000 Rockville Pike
Bethesda, MD 20892
Phone: 30 1/468-2 162

274—Healthy Schools

National Digestive Diseases Information Clearinghouse

Areas of Emphasis

Health Education

Information

Subject Matter: Digestive diseases

Target Groups

Students

Middle school/junior high

High school

- Parents
- Faculty and Staff
- community

Program Profile

The Digestive Diseases Clearinghouse is a congressionally mandated service of the National Institute of Diabetes, Digestive and Kidney Diseases of the National Institutes of Health. Since 1980, the clearinghouse has provided information about digestive diseases to educate the public, patients and their families, as well as physicians and other health care providers.

The clearinghouse provides an **inquiry** and referral service that responds to professional and public **requests.**The clearinghouse also maintains a **subfile** of the Combined Health Information Database (CHID), containing references to literature, products, programs, and services for patient education about digestive **diseases.**

Materials

- Fact sheets about specific digestive diseases
- Information about research developments and organizational and governmental activities related to digestive diseases

Information Specialist National Institute of Diabetes, Digestive and Kidney Diseases Box NDDIC 9000 Rockville Pike Bethesda, MD 20892

Phone: 301/468-6344

National Kidney and Urologic **Diseases** Information **Clearinghouse**

Areas of Emphasis

Health Education
 Information

Subject Matter:
Kidney and urologic diseases

Target Groups

• Students
Middle school/junior high

High school

- Parents
- Faculty and Staff
- community

Program Profile

The National **Kidney** and Urologic Diseases Information Clearinghouse (NKUDIC) is a resource and referral service established by the National Institute of Diabetes, Digestive and Kidney **Diseases** in 1987. The clearinghouse, authorized by Congress, is designed to increase the knowledge and understanding of patients, health **care** professionals, and the public about kidney **and** urologic diseases. NKUDIC gathers and **disseminates** education information produced by many sources.

NKUDIC responds to requests for information from health professionals, patients, and the public.

Materials

- Publications prepared by the National Institute of Diabetes, Digestive and Kidney Diseases
- Computerized data base of educational materials about kidney and urologic diseases—this subfile is available to the public on the Combined Health Information Database (CHID)
- Bulletin targeted toward professionals
- Annotated bibliographies and topical literature searches on selected topics on kidney and urologic diseases

For materials or additional information, contact:

Information Specialist
National Institute of Diabetes, Digestive and Kidney Diseases
Box **NKUDIC**9000 Rockville Pike
Bethesda, MD 20892
Phone: 301/468-6345

National Clearinghouse for Alcohol and Drug Information

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Program strategies, approaches, media

Subject Matter:

Alcohol or other drugs Tobacco HIV/AIDS related to drug use

Physical fitness

• Worksite Health Promotion for Faculty and Staff

School and Community Health Promotion

Target Groups

Students

Preschool Elementary Middle school/junior high

Students with special needs/special education

Parents

Faculty and Staff

High school

• Out-of-School, High-Risk Youth

community

Program Profile

The National Clearinghouse for Alcohol and Drug Information (NCADI) is a service of the Office for Substance Abuse Prevention (OSAP). OSAP was created by the Anti-Drug Abuse Act of 1986 to reduce the demand for illicit drugs and to prevent alcohol and other drug problems in the U.S. The Anti-Drug Abuse Act of 1988 greatly expanded the scope and functions of OSAP and increased its responsibilities.

The mission of NCADI is (1) to promote and distribute prevention materials including brochures, posters, videotapes, resource guides, directories, and program descriptions; (2) to disseminate Federal Government publications on alcohol and other drug topics; (3) to develop and maintain its in-house data base of popular press and scholarly journal articles on prevention, intervention, and treatment; and (4) to coordinate the Regional Alcohol and Drug Awareness Resource (RADAR) Network, which facilitates access to information at the State and local level.

NCADI is useful to those interested in school health because NCADI can supply school health **professionals** with:

- 1) Prevention materials for distribution in the classroom, at assemblies, and at special anti-drug events,
- 2) Materials designed to help parents prevent substance abuse among their children.
- 3) Materials to assist with the planning and implementation of a **worksite** drug policy for school **faculty**, staff, and administrators.
- 4) Materials designed to assist with the selection **and** implementation of a drug prevention curriculum.
- 5) Listings of drug prevention curricula available from various organizations.

Primary users of the clearinghouse include **students**, school administrators, school counseling personnel, **substance** abuse prevention specialists, policymakers, workplace drug program coordinators, local officials, the media, and the general public.

Materials

- The Fact Is.. . The Use of Steroids in Sports Can Be Dangerous (MS39 1 Fact Sheet/Resource Listing)
- What Works: Schools Without Drugs (PHD006 Booklet)
- Drug Prevention Curricula: A Guide to Selection and Implementation (PHD511 Booklet)
- The Fact Is... You Can Form a Student Assistance Program (MS374 Fact Sheets/Resource Listing)
- The Fad Is... Reaching Hispanic/Latino Audience Requires Cultural Sensitivity (MS406 Fact Sheet/Resource Listing)
- Prevention Resource Guide: Preschool Children (MS409)
- Prevention Resource Guide: Asian and Pacific Islander Americans (MS408)
- Youth and Drugs: Society's Mixed Messages. OSAP Prevention Monograph #6 (BK172 Book)
- AIDS: Another Way Drugs Can Kill (AV187 Poster)
- McGruff: Say "No " to Crack and Other Drugs (AVD14 Poster)
- Digale Que No (PH283 Spanish "Just Say No" booklet for kids)
- Ayudando a Sus Hijos a Decircle Que No/Helping Your Children Say No (PH283 Spanish Booklet)
- Ayudando a Sus Alumnos a Decircle Que No/Helping Your Students Say No (PH284 Spanish Booklet)
- 10 Pasos Que Ayudaran a Sus Hijos a Decir "No"; Guia Practica/10 Steps to Help Your Child Say 'No": Quicklist (PH287 Spanish Booklet)

Because NCADI has over 600 **items** in its inventory, it is advisable to request the NCADI Catalog which describes materials and services available.

For materials or additional information, contact:

NCADI **P.O.** Box 2345

Rockville, MD 20847 Phone: 301/468-2600 Fax: 301/468-6433 TDD: 800/487-4889

National Resource Center on Worksite Health Promotion

Areas of Emphasis

• Worksite Health Promotion for Faculty and Staff

Target Groups

Faculty and Staff

Program Profile

The National Resource Center on **Worksite** Health Promotion is a collaborative effort of the Washington Business Group on Health **(WBGH)** and the Office of Disease Prevention and Health Promotion (ODPHP) of the U.S. Public Health Service. The resource center provides reliable information and supports sound life shills in the area of health promotion and disease prevention at the **worksite**.

The center operates a **computerized** data base of information designed to support life skills and planning. The data base includes detailed descriptions of successful **worksite** programs and policies, services and resources available through other organizations, abstracts and summaries of selected research and evaluation studies, implementation guidelines, and a variety of policy documents including Federal and State regulations, organizational mission statements, and policy analyses relevant to **worksite** health promotion.

In addition to the data base, the resource center regularly convenes expert groups to examine critical issues in the field of **worksite** health promotion, with particular attention paid to the needs of small business, public employers, and "hard-to-reach" populations. Central to all resource center initiatives are the worksite-related goals set forth in *Healthy People 2000: National Health Promotion and Disease Prevention Objectives*.

Priority goals of the resource center include gathering and disseminating information in the following areas:

- 1) Effectiveness of **worksite** programs and policies in terms of improved health and quality of life, productivity, and cost savings;
- 2) Integration of **worksite** health promotion programs with employee benefits and other corporate **functions**;
- Targeted strategies which meet the special needs of small businesses, individual occupations, and diverse industries.

Primary users of the resource center include employers and employees.

Materials

- Achieving the Year 2000 Health Objectives for the Nation: Strategies For Business and Labor (monograph)
- Financial Incentives for Healthy Lifestyles: Potential and Pitfalls (monograph)
- Worksite Wellness (series of background papers)

For materials or additional information, contact:

Margaret Beckham
Information Manager
National Resource Center on Worksite Health Promotion
777 North Capitol St., NE
Suite 800
Washington, DC 20002

Phone: 202/408-9320 Fax: 202/408-5528

Office of Disease Prevention and Health Promotion National Health Information Center

Areas of Emphasis

- Health Education
 Information
- Health Services
- School as a Healthy Environment

Target Groups

- Parents
- Faculty and Staff
- . community

Program Profile

The Office of Disease Prevention and Health Promotion (ODPHP) National Health Information Center **(ONHIC)** is a health information **referral** organization putting people with health questions in touch with those organizations that are beat able to answer. Established in 1979 by ODPHP, the center's main objectives are to:

- Identify health information resources;
- Channel requests for information to these resources; and
- Develop publications on health-related topics of interest to health professionals, the health media, **and** the general public.

The center meets these objectives by using a variety of **health** information resource materials, a data base of health-related organizations, and an information referral system.

ONHIC has developed resource lists for each of the priority areas for *Healthy People 2000: National Health Promotion and Disease Prevention Objectives*.

A variety of diitories and resource lists are available which can be used to identify sources of materials with school health applications. In addition, ONHIC can help people locate information on school health services and on the school as a healthy environment.

The center was established in 1979 as a service of ODPHP in the U.S. Public Health Service, U.S. Department of Health and Human Services. This was in response to Title XII of the Public Health Service Act (the National Consumer Health Information and Promotion Act of 1976, PL 94-317, as amended).

Materials

- Toll-Free Numbers for Health Information (Healthfinder)
- Federal Health Information Centers (Healthfinder)
- National Health Observances (Healthfinder)
- Healthy People 2000 Resource Lists
- Locating Funds for Healthy Peopk 2000 Health Promotion Projects
- Health Information Resources in the Federal Government
- Teacher/Health Education Student Packet of Materials

For materials or additional information, contact:

ONHIC

P.O. Box 1133 Washington, DC 20013-1 133

Phone: 301/565-4020 or 800/336-4797

Fax: 301/565-5112

Office of Minority Health Resource Center

Areas of Emphasis

• Health Education

Subject Matter:

Alcohol or other drugs Injuries/safety

Cancer

Cardiovascular health Nutrition

HIV/AIDS

Violence/conflict resolution Tobacco

School and Community Health Promotion

Information

Target Groups

- Faculty and Staff
- community
- Health Professionals

Program Profile

The U.S. Department of Health and Human Services, Public Health Service, Office of Minority Health (OMH), Office of Minority Health Resource Center (OMH-RC) was established by the U.S. Department of Health and Human Services, OMH in October 1987. The resource center maintains information on health-related resources; which target Asian/Pacific Islanders, Blacks, **Hispanics/Latinos**, and Native Americans; and are available at the Federal, State, and local levels. In addition to serving as a central source of minority health information, OMH-RC works with OMH in identifying information gaps and stimulating the development of resources where none exist. The resource center staff are available to answer requests from consumers and health professionals, and bilingual staff are available to assist Spanish-speaking **requestors**. The activities of OMH-RC concentrate on the following topics: cancer; chemical dependency; diabetes, heart diseases, and stroke; homicide, suicide, and unintentional injury; and infant mortality. OMH-RC maintains a computerized data base of minority **health**-related publications, organizations, and programs which concentrate on minority health priority areas and associated risk factors. The data base includes sources of free or low-cost services and materials relating to minority health issues. OMH-RC has also established a network of professionals active in a variety of disciplines that can provide expert technical assistance to minority-based community organizations, voluntary groups, and individuals.

Materials

• OMH-RC has prepared a series of fact sheets entitled *Closing the Gap, on* each of the minority health areas, i.e., cancer, chemical dependency, diabetes, heart disease/stroke, homicide/suicide/unintentional injury, infant mortality, and AIDS. The series describes the extent to which specific groups are affected, details avenues for prevention, and offers sources of additional information. Health material resource lists on Asian/Pacific Islanders, Blacks, Hispanics, Native Americans; funding; and audiovisual materials are available. Other publications that focus on minority health-related issues are also available through the resource center.

For materials or additional information, contact:

Office of Minority Health Resource Center **P.O. Box** 37337 Washington, DC **20013-7337**

Phone: 301/587-1938 or 800/444-6472

Fax: **301/565-5** 112

Family Life Information Exchange

Areas of Emphasis

Health Education

Information

Subject Matter:

Family life/abstinence

Target Groups

Students

Middle school/junior high

High school

- Faculty and Staff
- Out-of-School, High-Risk Youth

Program Profile

The Family Life Information Exchange distributes various Department of Health and Human Services publications on family planning, adolescent pregnancy, and adoption. The exchange is a service of the Office of Populations Affairs. The patient and professional education materials are available free of charge in limited quantities. The exchange distributes a pamphlet on adolescent abstinence that might be useful to school health **programs.**

Primary users include Title X- and Title XX-funded agencies and health **service** providers.

Materials

- Teenage Pregnancy and Fertility in the U.S.
- Many Teens Are Saying No (pamphlet: free of charge)
- OAPP Funded Curricula

For materials or additional information, contact:

Jenrose Weldon Project Director
Family Life Information Exchange
P.O. Box 37299
Washington, DC 20013-7299
Phone: **301/585-6636**

Clearinghouse on Child Abuse and Neglect Information

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Program strategies, approaches, medii

Subject Matter:

Violence/conflict resolution Injuries/safety Family life

Child abuse and neglect

School and Community Health Promotion

Target Groups

Students

Preschool Elementary Middle school/junior high
High school Students with special

needs/special education

Parents

Faculty and Staff

. community

Program Profile

The Clearinghouse on Child Abuse and Neglect Information serves as a resource center for the **acquisition** and dissemination of child abuse and neglect materials. Authorized under Public Law 100-294, the clearinghouse is the information component of the National Center on Child Abuse and Neglect **(NCCAN)**, which is located within the U.S. Department of Health **and** Human Services. At the core of the clearinghouse is a 14,000 entry data base consisting of child abuse and neglect related documents. Standardized and specialized bibliographies are available, as are Federal grant reports and curricula. Literature searches of the data base can be obtained from the clearinghouse. The data base is also directly available to the public through DIALOG Information Services, Inc.

Insofar as child maltreatment and family violence impact on the health of the Nation's children, anyone in school education/health may find the information **useful**. In addition, school personnel are among those mandated to report child abuse and neglect. Materials for children on the topic of sexual abuse are also available.

Primary users of this clearinghouse include professionals and the public.

Materials

- The Educator's Role in the Prevention and Treatment of Child Abuse
- Early Childhood Education Professionals: Preventing and Responding to Child Maltreatment

For materials or additional information, contact:

Information Assistant Clearinghouse on Child Abuse and Neglect Information **P.O.** Box 1182

Washington, DC 20013 Phone: **703/82** 1-2086 Fax: **703/506-0384**

Computer access: through DIALOG, File 64

Clearinghouse on Family Violence Information

Areas of Emphasis

• Health Education

Curricula Information Personnel training

Program strategies, approaches, media

Subject Matter:

Comprehensive health Alcohol or other drugs Violence/conflict resolution

education Family life

• Health Services Counseling/mental health

- School as a Healthy Environment Safety
- School and Community Health Promotion

Target Groups

Students

Elementary Middle school/junior high Students with special needs/special education High school

Parents

- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community

Program Profile

The Clearinghouse on Family Violence Information was established in 1987 by Public Law 98-457, the Family Violence Prevention and Services Act (FVPSA). The goal of the clearinghouse is to provide information and services to practitioners and researchers who are working to prevent family violence and provide assistance to victims. The clearinghouse is supported by FVPSA funds and is coordinated through the Clearinghouse on Child Abuse and Neglect Information. Currently, 7 publications and 21 bibliographies are available.

Information from the Family Violence Clearinghouse can be used in curriculum development or in conflict resolution training.

Primary users of the clearinghouse include researchers, practitioners, Federal agencies, and State and local agencies.

Materials

- Family Violence: An **Overview** (Free)
- Effects of Family Violence (\$4.00)
- Medical Aspects of Family Violence (\$2.00)

For materials or additional information, contact:

Clearinghouse on Family Violence Information **P.O.** Box 1182 Washington, DC 20013

Phone: **703/82** 1-2086 Fax: **703/506-0384**

Phone: 202/245-2892

or

William D. Riley
Acting Director
Division of Policy and Legislation
Room **312F**, HHH Building
Administration for Children and Families
200 Independence Ave., SW
Washington, DC 20201

National Child Support Enforcement Reference Center

Areas of Emphasis

• Health Education Curricula

Subject Matter:

Life skills

Family life

Health Services

Counseling/mental health

• School and Community Health Promotion

Target Groups

Students

Middle school/junior high

High school

- Parents
- Faculty and Staff
- Out-of-School, High-Risk Youth
- . community

Program Profile

Some of the reference center's materials, notably the *Handbook on Child Support Enforcement*, may be useful to students who are single parents as well as their parents. Other publications are reference works that may be used in developing school curricula on pregnancy prevention and paternity establishment as well as overall family responsibility courses.

Primary users of the reference center include State child support enforcement agencies; State and local welfare agencies; courts; other State and local social/family service professionals; educators; and policymakers.

Materials

- Handbook on Child Support Enforcement (booklet)
- Paternity Establishment, Third Edition (manual)
- Patemity Consent Process (monograph)

For materials or additional information, contact:

National Child Support Enforcement Reference Center 370 **L'Enfant** Promenade, SW 4th Floor East Washington, DC **20447**

Phone: 202/401-9382 Fax: 202/401-4683

or

Frank Adamson

Branch Chief, Reference Center Administration for Children and Families Office of Child Support Enforcement Reference Center, 4th Floor East 370 L'Enfant Promenade, SW Washington, DC 20447

Phone: 202/401-9382

Toxic Substances Control Act Assistance Information Service

Areas of Emphasis

Health Education

Information

Subject Matter:

Environment

• School as a Healthy Environment

Asbestos abatement

Target Groups

Students

Middle school/junior high

High school

- Parents
- Faculty and Staff
- community

Program Profile

The Toxic **Substances** Control Act **(TSCA)** Assistance Information Service **(TAIS)** or "TSCA Hotline" was established under Section 26(d) of the Toxic Substances Control Act of 1976 (Public Law 94-469). The TSCA Hotline provides information and technical assistance on this act, on the Asbestos School Hazard Abatement Act, and the Asbestos Hazard Emergency Response Act. General asbestos information is also available. Hours of operation are **8:30** AM to **5:00** PM EST.

Materials

- The ABCs of Asbestos in Schools (booklet)
- Environmental Hazards in Your School: A Resource Handbook
- ASHAA (Public Law 98-377) (Asbestos School Hazard Abatement Act)
- AHERA (public Law 99-519) (Asbestos Hazard Emergency Response Act)
- . AHERA Summary

- AHERA Fact Sheet
- AHERA Q&A
- *ASHARA* (Public Law 101437)
- Asbestos in Schools: Evaluation of AHERA: Fact Sheet 7/91
- Asbestos in Schools: Evaluation of A Summary Report 6/91
- Answers to the Most Frequently Asked Questions About Reinspections Under the AHERA Asbestos-In-Schools Rule
- The Inside Story: A Guide to Indoor Air Quality
- Formaldehyde Fact Sheet
- Lead Fact Sheet (Toxic Information Series)
- Mercury Fact Sheet (Toxic Information Series)
- Think Globally, Act Locally (informational poster)

For materials or additional information, contact:

TSCA Assistance Information Service U.S. Environmental Protection Agency, TS-799 401 M St., SW Washington, DC 20460

Phone: 202/554-1404; or 800/835-6700 (school issues only)

Fax: 202/554-5603 (document requests only)

or

Wanda Woodburn

Environmental Protection Specialist U. S. Environmental Protection Agency, TS-799 401 M St., SW Washington, DC 20460

Phone: 202/260-3795

Environmental Protection Agency Public Information Center

Areas of Emphasis

 Health Education Curricula

Information

Program strategies, approaches,

media

Subject Matter: Environment

School as a Healthy Environment

Asbestos abatement

Drinking water lead

Radon; indoor air quality;

recycling

• School and Community Health Promotion

Target Groups

• Students Preschool

Elementary

Middle school/junior high

- Faculty and Staff
- community

Program Profile

The U.S. Environmental Protection Agency (EPA) Public Information Center (PIC) provides nontechnical information on environmental issues and EPA. Information is available from PIC on drinking water, air quality, pesticides, radon, indoor air, Superfund, wetlands, and many other environmental topics.

Materials

- Earth Trek.. .Explore Your Environment
- The President's Environmental Youth Awards
- Be an Environmentally Alert Consumer
- Environmental Education Materials for Teachers and Young People

- Lead and Your Drinking Water
- Citizen's Guide to Pesticides

For materials or additional information, contact:

U.S. EPA Public Information Center 401 M St., SW PM-21 **1B** Washington, DC 20460

Phone: 202/260-2080

or

Kevin Rosseel
Director
U.S. EPA Public Information Center
401 M St., SW PM-211B
Washington, DC 20460
Phone: 202/260-2080

The National Injury Information Clearinghouse

Areas of Emphasis

Health Education

Information (injury statistics related to consumer products)

Subject Matter: Injuries/safety

Program Profile

In creating the Consumer Product Safety Commission (CPSC) in 1973, Congress emphasized widespread sharing of information by the new agency. According to the Consumer Product Safety Act, Sec. 5(a)(l), the National Injury Information Clearinghouse exists "to collect, investigate, analyze, and disseminate injury data and information relating to the causes and prevention of death, injury, and illness associated with consumer products."

The clearinghouse maintains thousands of detailed investigative reports of injuries associated with consumer products. It has access to automated data bases with several million incidents of injuries that have been **reported** by a nationwide network of hospital emergency departments. Product-associated deaths extracted from death certificates also provide a major information resource.

Educators may base class assignments on clearinghouse data and encourage their students to place requests for information directly.

Materials

The clearinghouse distributes publications such as hazard analyses, special studies, and data summaries.
These reports identify hazards, accident patterns, and types of products. Lists of available titles as well as the documents themselves may be obtained by writing the clearinghouse. There may be charges for material requested.

For materials or additional information, contact:

The National Injury Information Clearinghouse 5401 **Westbard** Ave., Room 625 Washington, DC 20207

Phone: 301/492-6424

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Form to Provide Additional Information for the Directory

This form may be **filled** out and returned to the Interagency Ad Hoc Committee on Health Promotion Through the Schools to provide information on Federal programs relevant to school health which may not be represented in this current volume of *Healthy Schools*, or to update the Committee on information relating to programs included in this volume. Please copy and fill out a separate form for each relevant program or activity, and return the completed form to:

Interagency Ad Hoc Committee on Health Promotion Through the Schools **c/o** Office of Disease Prevention and Health Promotion 330 C Street SW, Suite 2132 Washington, DC 20201

Name of Department/Agency/Bureau/Office		—	
• Title of program or activity		_	
• AREAS OF EMPHASIS			
Please check how this program or activity relates to school health:			
[] SCHOOL HEALTH EDUCATION			
[] curriculum development			
[1 policy			
[] personnel training			
[] other @lease specify)			
Subject matter: (please check all that apply):			
[] comprehensive school health education	[] tobacco		
[] alcohol or other drugs	[] cancer		
[] cardiovascular health	[] dental health		
[] violence/conflict resolution	[]life skills		
[] injuries/safety	[] family life		
[] environment	[] HIV/AIDS		
[] nutrition	[] physical fitness		
[] other (please specify)			
[] immunizations			
[] school nursing			
[] counseling/mental health			
[] screening			
[] school-based or school-linked health services			
[] other (please specify)			

] asbestos abatement	[] HEALTHY SCHOOL ENVIRONMENT [1 safety	
[] other (please specify) [] HEALTHY SCHOOL FOOD SERVICES [] PHYSICAL EDUCATION, SPORTS, RECREATION [] WORKSITE HEALTH PROMOTION FOR SCHOOL FACULTY AND STAFF [] COORDINATION OF SCHOOL AND COMMUNITY HEALTH PROMOTION [] OTHER (please specify) TARGET GROUPS [] preschool students [] elementary students [] elementary students [] middle school/junior high students [] middle school/junior high students [] ligh school students [] students with special needs/special education MATERIALS Please attach a list of materials (curricula, publications, posters, videos, etc.) produced by this program or activity and specify how each may be obtained. PROGRAM PROFILE Please attach a brief description of this program or activity as it relates to school health, including the following points, as applicable: mission of the program as it relates to school health legislative or administrative authority funding history program accomplishments current activities (e.g., types of competitions; number of projects funded; current and anticipated priorities, etc.) PROGRAM CONTACT PERSON Who should be contacted for further information about this program or activity? Name Title	asbestos abatement	
[] HEALTHY SCHOOL FOOD SERVICES [] PHYSICAL EDUCATION, SPORTS, RECREATION [] WORKSITE HEALTH PROMOTION FOR SCHOOL FACULTY AND STAFF [] COORDINATION OF SCHOOL AND COMMUNITY HEALTH PROMOTION [] OTHER (please specify) • TARGET GROUPS [] preschool students [] elementary students [] middle school/junior high students [] high school students [] students with special needs/special education • MATERIALS Please attach a list of materials (curricula, publications, posters, videos, etc.) produced by this program or activity and specify how each may be obtained. • PROGRAM PROFILE Please attach a brief description of this program or activity as it relates to school health, including the following points, as applicable: • mission of the program as it relates to school health • legislative or administrative authority • funding history • program accomplishments • current activities (e.g., types of competitions; number of projects funded; current and anticipated priorities, etc.) • PROGRAM CONTACT PERSON Who should be contacted for further information about this program or activity? Name Title		
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Please attach a brief description of this program or activity as it relates to school health, including the following points, as applicable: • mission of the program as it relates to school health • legislative or administrative authority • funding history • program accomplishments • current activities (e.g., types of competitions; number of projects funded; current and anticipated priorities, etc.) • PROGRAM CONTACT PERSON Who should be contacted for further information about this program or activity? Name Title	Please attach a list of materials (curricula, publications,	posters, videos, etc.) produced by this program or
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